

293DRAKE, NATHAN F,

O-382,849 1st,LTM

EUROPEAN AM ( N.J.)

Declassified in accordance with D.O. 13526

RRE Form #43  
20 Sep 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

*9/24*

DRAKE	NATHAN	F	1Lt	0-382849
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Subject remains have been permanently interred overseas in the United States Military Cemetery ST AVOLD

STATION FILE

Incl #

SEC 100 100  
10 100 100

Attached hereto are copies of reports and/or other identifying notes of possible  
medical value, containing the:

Serial	Initial	Initial	Initial	Initial
(100)	(100)	(100)	(100)	(100)

Subject remains have been personally reviewed by the following:

ST. ALBANS

## REPORT OF INVESTIGATION

## AREA SEARCH

<b>REINTERRED</b> U. S. MIL. CEM. St-A PLOT <u>AAAAAR0W 2</u> GRA <u>21</u>
---

AGRC Form # 10 (Revised)

1 January 1946.

8 May 1946

Date

NAME Drake, Nathan F. RANK 1st Lt. ASN 0-382849ORGANIZATION UnknownMEANS OF IDENTIFICATION One Identification Tag, on body

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation?  
If so, state the following information:

a. NAME \_\_\_\_\_ RANK \_\_\_\_\_ ASN \_\_\_\_\_

b. ORGANIZATION \_\_\_\_\_

2. Was partial identification established? . If so, state the facts as to whom you believe the deceased to be:

a. NAME NATHAN F. DRAKE RANK 1st Lt. ASN 0 - 382849

b. ORGANIZATION \_\_\_\_\_

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY none

(Use reverse side for listing of crew members from MACR)

a. Date of above burials \_\_\_\_\_ Common Graves? \_\_\_\_\_

5. Name and Type of Cemetery UNBURIED  
(Military or Civilian)
6. Map Coordinates of the Cemetery \_\_\_\_\_  
a. Town \_\_\_\_\_ Country \_\_\_\_\_
7. Give exact location in cemetery of the remains.  
a. Section \_\_\_\_\_ Row \_\_\_\_\_ Grave \_\_\_\_\_  
b. Is Sketch attached? YES
8. If remains are not located in a cemetery, give exact location.  
a. Town FT. ST. BLAISE, FEY Coordinates U - 804494  
b. Is sketch attached? YES  
c. Is area mined? NO
9. How is the grave marked? UNBURIED
10. If grave is marked with cross, give exact markings thereon \_\_\_\_\_  
a. From what source was this information obtained? \_\_\_\_\_  
(Identification tags, personal effects)  
b. By Whom \_\_\_\_\_
11. Where are the cemetery records? NONE  
(Town Hall, cemetery, burgermeister's office)  
a. What information was contained thereon? \_\_\_\_\_  
b. Where was the information obtained? \_\_\_\_\_  
c. By Whom? \_\_\_\_\_
12. What is the date of death? UNK  
a. Give basis \_\_\_\_\_
13. What is the cause of death? UNK  
b. Give basis \_\_\_\_\_
14. What is the date of burial? UNBURIED  
a. Give basis \_\_\_\_\_

15. Where was the place of death? FORT ST. BLAISE, FEY Coords U - 804494

Give basis Mr VAJA

16. Where were the remains found? FORT ST. BLAISE Coords U - 804494

a. By Whom? MR VAJA , MR PERGUIN

b. Is sketch attached? YES

17. Was a casket used? UNBURIED Who furnished the casket? \_\_\_\_\_

Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_

18. Who made the burial UNBURIED  
(Civilian, American Mil. or German Mil).

a. What are the names and addresses? \_\_\_\_\_

b. Are certificates and statements attached? YES

SECTION B - AIR CORPS DECEASED (To be Completed only if Deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? \_\_\_\_\_

a. Give location in plane from which the bodies were removed \_\_\_\_\_

(Tail gunner, pilot, radio, turret, etc., or front, side, of plane)

b. Near wreckage? \_\_\_\_\_

20. Scene of crash must be investigated. Give complete results of Investigation (if removed, state when and by whom).

a. Type of Plane \_\_\_\_\_

b. Markings and/or name on plane \_\_\_\_\_

c. Give numbers on motors, machine guns, instruments, radios or other equipment: \_\_\_\_\_

21. How did crash occur? \_\_\_\_\_ Anti-aircraft

Enemy Planes? \_\_\_\_\_ Collision? \_\_\_\_\_

22. Did plane explode in the air? \_\_\_\_\_ On ground? \_\_\_\_\_
23. Did plane burn in the air? \_\_\_\_\_ On ground? \_\_\_\_\_
24. What was the direction of the flight? \_\_\_\_\_
25. What was the civilian opinion regarding destination of plane? \_\_\_\_\_  
\_\_\_\_\_
26. Had bombs been released prior to the crash? \_\_\_\_\_
27. Does specific time and date of crash correspond with date of death of above named deceased?  
\_\_\_\_\_
28. Number of planes in formation prior to crash \_\_\_\_\_
29. State precise time and date of plane crash \_\_\_\_\_  
(Night? Day?)
30. Were parachutists seen? \_\_\_\_\_ How many? \_\_\_\_\_ Escaped? \_\_\_\_\_  
Prisoners? \_\_\_\_\_

**SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).**

31. Were remains found in wreckage of a tank? \_\_\_\_\_
- a. Give specific position in tank from which deceased was removed. \_\_\_\_\_  
\_\_\_\_\_
- (Radio man, driver, assistant driver or... front, side, or back)
- b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)
- a. Type of tank \_\_\_\_\_
- b. Markings and/or name of tank \_\_\_\_\_
- c. Numbers on motors, machine guns, ammunition, instruments, etc \_\_\_\_\_
33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_  
\_\_\_\_\_
34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_



35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_

36. Does specific time and date of disablement correspond with date of death of above named deceased? \_\_\_\_\_

37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night? Day?)

38. Did any of the crew members escape? \_\_\_\_\_ Prisoners? \_\_\_\_\_

**SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable)**

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) UNK

It so, give, complete and thorough results of the interrogation.

a. Are all certificates and statements of people who possessed knowledge of the case attached? YES

40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased STATEMENT ATTACHED

**SECTION E - GENERAL (To be completed by investigation in all cases)**

41. Were personal effects recovered by the investigating team NO

If not, state reason \_\_\_\_\_

a. Were identification tags found at the time of death? NO

Where? SEE NARRATIVE REPORT By Whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

b. Were personal effects found at the time of death? UNK

Where? \_\_\_\_\_ By Whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

c. Was deceased identified by living members of the crew at the time of death? \_\_\_\_\_

**UNK**

d. Did Cemetery register or cross indicate the immunization shot? **UNBURIED**

42. Was Deceased given first aid? **UNK** If so, where? \_\_\_\_\_

By whom? \_\_\_\_\_ Are statements from the medical people attached? \_\_\_\_\_

43. Was deceased evacuated to a German civilian hospital? **NO**

WHERE? \_\_\_\_\_ Names of people concerned \_\_\_\_\_

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? **NO**

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains?

**DECOMPOSED**

(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? **NO**

a. If so, give basis for positive assumption \_\_\_\_\_

b. If so, has higher headquarters been notified? \_\_\_\_\_

47. Was case previously investigated? **NO** By Whom? \_\_\_\_\_

When? \_\_\_\_\_

48. Give full names, addresses, and information obtained from each person interviewed

**MR VAJA & MR PERGUIN : BOTH OF FEY**

49. Are all positive statements regarding identification and particulars surrounding death attached?

**YES**

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?

NO

51. Was investigation preceded by advanced publicity? YES

(If special investigation, give case number)

52. Give Brief Narrative SEE BELOW

(Use attached sheets, if necessary)

*J. Piaseczny*  
Signature of Interpreter

J.PIASECZNY

Rank ASN

3049 QM GRC

Organization

*Ernest P. Cochmann*  
Signature of Investigator

PVT ERNEST P COCHMANN 44084977

Rank ASN

3049 QM GRC

Organization

NARRATIVE REPORT

An American soldier was found about the 15th of June 1945 by Mr Emile VAJA. The remains were unburied. The only dog tag on the body is attached to the case.

01

BY

SEE BELOW

PVT ERNEST E. COCHRAN 3408337

J. L. LEBRON

NOV 19 1953

NOV 19 1953

ERNEST E. COCHRAN

In Mexico City, Mexico, on the 18th of June 1953, the remains of a man were found. The only dog - tag on the body is attached to the remains.

TRUE COPY

DECLARATION

Je sous signe VAJA, Emile avoir trouve le cadavre d'un Americain au Fort St Blaise vers le 15 Juin 1945, lors d'Une promenade. Je ne connais rien aux circonstances de sa mort.

Fey le 29 Avril 1946

Signe Emile Vaja  
Maria Perquin

S T A T E M E N T

I the undersigned, Vaja, Emile certify that I have found a body of an American soldier at Fort St Blaise. It was at about the 15th of June 1945 while having a walk.

I do not know anything about the circumstances of his death.

Fey the 29th of April 1946

signed: Emile VAJA & Marie Perquin

CERTIFIED A TRUE COPY

*Howard E. Metzbower*  
HOWARD E. METZBOWER  
2nd Lt Inf.

DRAKE, NATHAN E. 0-382849  
REINTERRED U.S. MIL. CEM.  
ST. AVOLD, AAAA-2-21

TRUE COPY

DECLARATION

Je soussigné VALA, Emilie certifie que j'ai trouvé le cadavre d'un Américain au Fort St Blaise vers le 15 Juin 1945, lors d'une promenade. Je ne connais rien aux circonstances de sa mort.

Fait le 29 Avril 1946

Signe Emilie Vala  
Marie Perduin

STATEMENT

I the undersigned, Vala, Emilie certify that I have found a body of an American soldier at Fort St Blaise. It was at about the 15th of June 1945 while having a walk. I do not know anything about the circumstances of his death.

Fait the 29th of April 1946

signed Emilie VALA & Marie Perduin

CERTIFIED A TRUE COPY

*Howard R. Westbower*  
HOWARD R. WESTBOWER  
Sgt 1st Inf.

DRAKE, BATHAN E. O-382849  
RETIRED U.S. MIL. GEN.  
ST. AVILA, AAAA-2-21

+ copies

Je soussigné Vaja Emile avais trouvé le  
cadavre d'un Américain au fort <sup>5<sup>e</sup> Belgique</sup> Saint-Blaise.  
Le soir de 15 juin 1945 lors d'une promenade  
Je ne connais rien aux circonstances de sa  
mort.

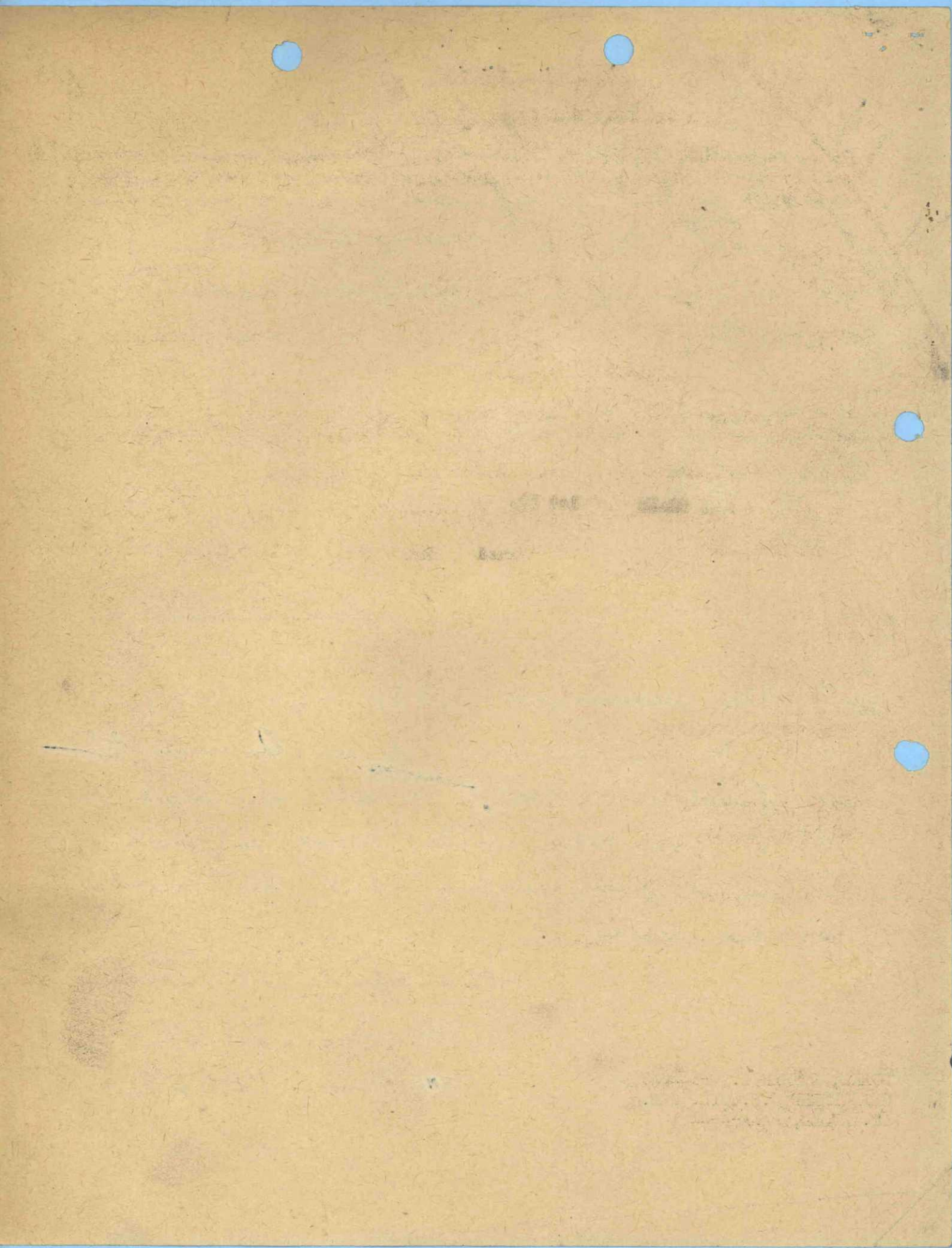
Fey le 29. 4. 46.

Emile Vaja  
Marie Perquin

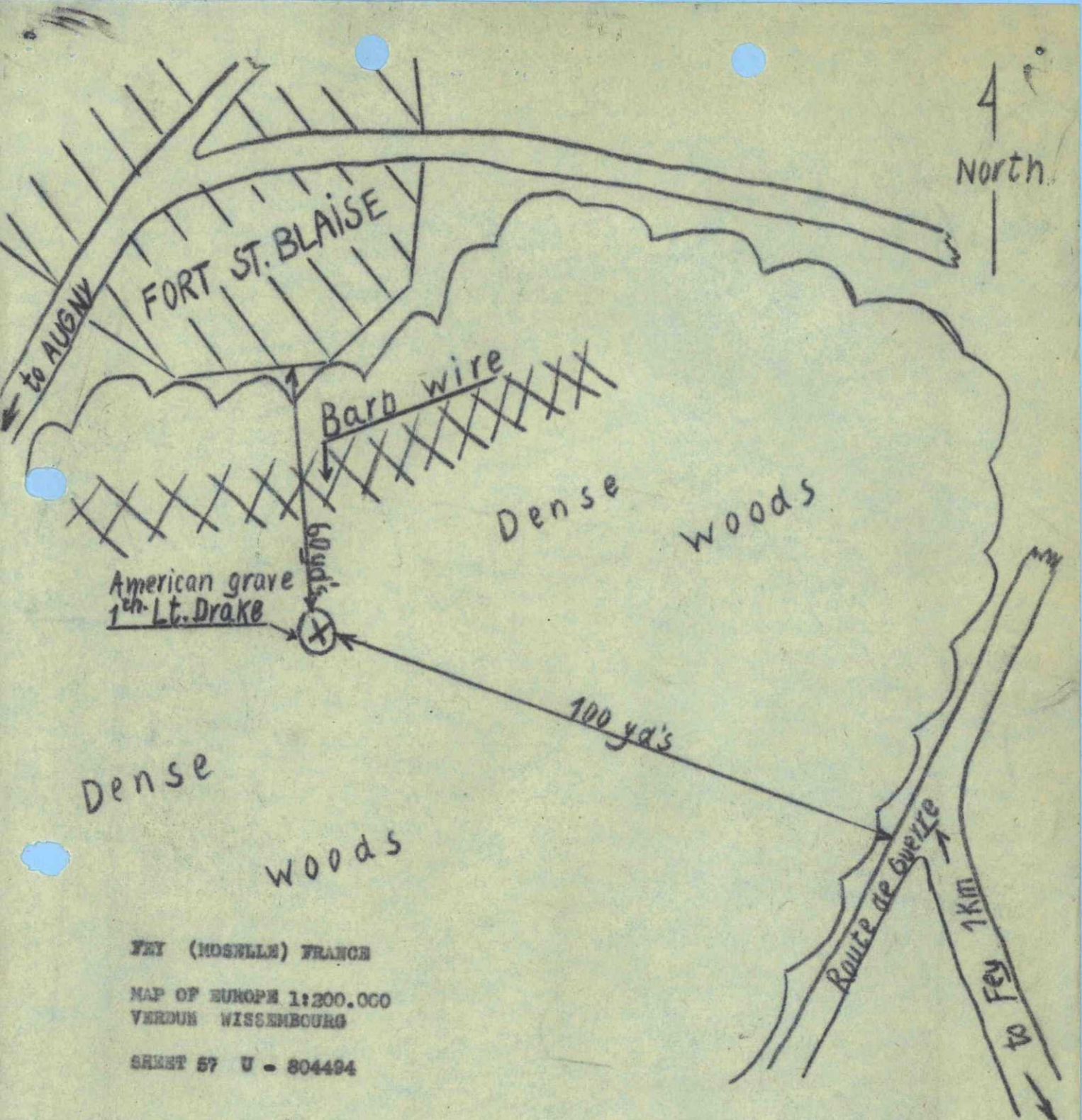
I, the undersigned, VAJA Emile certify to  
have found a body of an American ~~soldier~~  
at Saint-Blaise FORT. It was at about the  
15<sup>th</sup> of June 1945 while taking a walk.  
I do not know anything about the circumstances  
of his death.

Fey the Ap. 29<sup>th</sup> 1946.

MR. EMILE VAJA  
MME. Marie PERQUIN





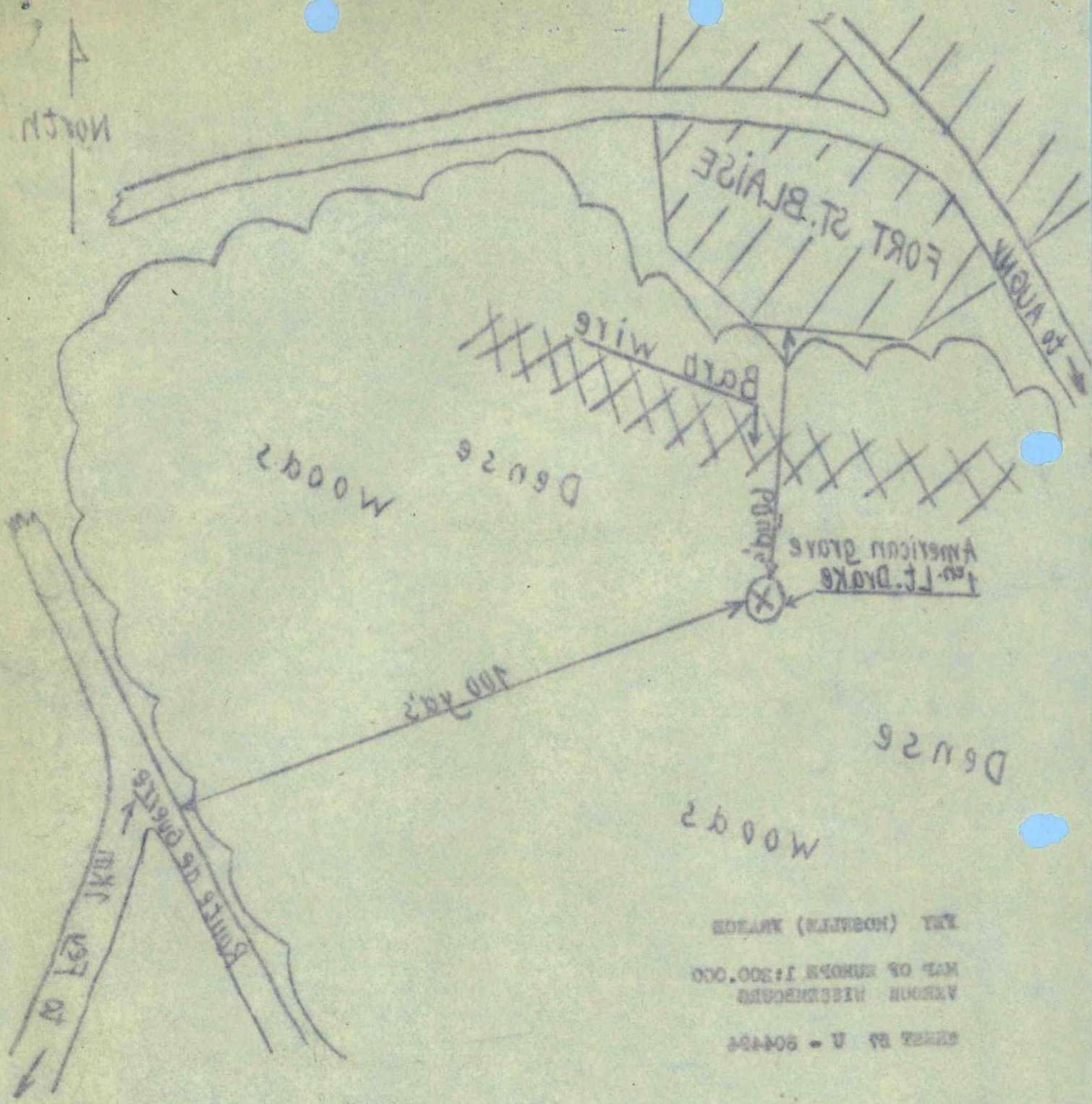


Fey (MOSELLE) FRANCE

MAP OF EUROPE 1:200,000  
VERDUN WISSEMBOURG

SHEET 57 U - 804494

DRAKE, NATHAN E. O-382849  
REINTERRED U.S. MIL. CEM.  
ST. AVOLD AAAA-2-21



MAP OF BUNKER 1:300,000  
 AROUND WISCONSIN  
 SHEET BY U - 504484  
 KEY (HORIZONTAL) SYMBOL

ST. JOHN WARDEN  
 HIGHLIGHTED U.S. MIL. CMD.  
 GRAVE, WARDEN L. J. 353819

NOTICE OF DISINTERMENT  
(Avis de Exhumation)

ERT-02 Form No 8

Date 30 April 1946  
(Date)

The below listed U.S. deceased personnel have this date been disinterred  
( La personne Americaine decedee, ci dessous indiquee a ete, a cette date,

**Q 260584 ST AVOLD**  
from the location as shown and have been evacuated to U.S. Military Ceme-  
(exhumee du lieu indique et a ete evacuee dans un cimetiere Americain.)

-tery, **Q 260584 ST AVOLD** for reburial  
( pour etre re-enteree

<b>NATHAN F. DRAKE</b>	<b>1st Lt.</b>	<b>O - 382849</b>	<b>FORT ST BLAISE, FEY (MOSELLE)</b>
(NAME)	(RANK)	(ASN)	( PLACE OF DISINTERMENT )
(FON)	(GRADE)	( NR)	If communal cenetery show (Si le lieu d'exhumation est
			Plot, Row and Grave No, if un cimetiere communal, indi-
			available.
			-quer l'endroit, le No du chemin et celui de la tombe, s'il y a lieu.

**REINTERRED**  
U. S. MIL. CEM. St-AVOLD  
PLOT ~~AAAA~~ ROW 2/ GRAVE 2/

*Howard E. Metzower Sr.*  
(Officer or NCO in charge of Disinterment)  
**HOWARD E. METZOWER 2nd Lt. Inf**

**3049 QM GRC**

(Organisation)

UNITED STATES GOVERNMENT  
OFFICE OF THE SECRETARY

20 April 1954  
MEMORANDUM  
(1 page)

The above listed items, received pursuant to the request of the Board of Review, are being furnished to you for your information. The items are being furnished to you for your information and are not to be distributed outside your office.

Very truly yours,  
[Signature]

FOR THE SECRETARY  
[Signature]  
[Title]  
[Address]

Prof. [Name]  
[Address]  
[City, State, Zip]

RECEIVED  
U. S. DEPARTMENT OF COMMERCE  
WASHINGTON, D. C.

UNITED STATES GOVERNMENT  
OFFICE OF THE SECRETARY  
WASHINGTON, D. C.

AGRC  
FORM No. 11  
Revised 5 January 1946

## CHECK LIST OF UNKNOWNNS

(to be completely filled out and attached to each copy of Report of Interment  
WD QMC Form 1042)

~~Unknown~~ X **Nathan F. Drake**  
Cemetery **St-Avold U.S.Mil.Gem.(Q.260584)**  
Plot **AAAA** Row **2** Grave **21**

1. ~~Interment~~ **Reprocessed 1 November 1946**  
(hour) (date)

2. Place of death \_\_\_\_\_  
(name of closest town) (coordinates and letter Prefex, maps)

(Sheet, scale and serials used)

3. Remains recovered ~~on 11 November 1946~~ **and reprocessed by Central Identification Point**  
(name and organization)

4. Evacuated to Cemetery by \_\_\_\_\_  
(name and organization)

5. **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

Clothing                      Indicate unusual markings  
Markings                      Sizes                      Color wear, tear, repairs, etc.

Item \_\_\_\_\_

\*Headgear **1 steel helmet and liner, markings on inside steel helmet S-9905 - A white Lt's bar on front covered by a red diamond painted over it (Same on liner). A white rectangle vertically painted on rear of helmet.**

"SIMMONS"

Raincoat **1 G.I. raincoat, medium size, markings "Semmer" markings in purple indelible ink hard to distinguish. Referred to Laboratory for verification.**

~~Jacket, Field~~

~~Jacket, Field~~

Jacket, Combat **remnants of 1 Tanker's jacket (zipper front style) - Markings apparently "ORNE" in purple indelible ink hard to distinguish - Referred to Laboratory for verification.**

~~Jacket, Combat~~

~~Jacket, Combat~~

Jacket, HBT **none**

\*Shirt, Wool OD **none**

Undershirt, Wool **none**

Undershirt, Cotton **none**

Trousers HBT **none**

\*Trousers, Wool OD **none**

CHECK LIST OF UNKNOWN

[The following text is extremely faint and largely illegible due to the age and quality of the document. It appears to be a checklist or a list of items, possibly names or identifiers, arranged in columns. Some faint words and numbers are visible, but they cannot be accurately transcribed.]

1. [Illegible]

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46. [Illegible]

47. [Illegible]

48. [Illegible]

49. [Illegible]

50. [Illegible]

Belt, Web **2 small portions of webbed belt, brass end tab.**

Drawers, Wool **none**

Drawers, Cotton **none**

Leggins, Wool **none** (Note unusual lacing) **none**

Socks, ~~wool~~ **1 pair wool**

\*Shoes **1 pr.** (type) **G.I. field shoes, brown size 10**

Overshoes **none**

Web Equipment (Type) **1 ammunition belt and knife sheath**

(Other item) **1 thin lenthier strap lixe shoulder strap from camera - remnants of fleece**

(Other item) **lining front fleece lined jacket. Several rifle grenade cartriges and 38 ammunition**

\*If body is nude, sizes of these items should be computed by measuring the remains.

6. Chevrons or Insignia

**none**

(type & location : shirt, jacket, coat, helmet)

Shoulder Patch **none**

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces

**Ground Forces**

8. Description of Remains :

Age **utd** Height **Approx. 6' to 6'2"** Weight **utd** Description of wounds **skull crushed**

Bandages or dressings **none** Scars **utd**  
(length, width, location)

Tattoos **utd**  
(Number, location - illustrate on sep, page)

Outstanding miles, warts or birthmarks **utd**  
(yes-no; description, location)

Sunburn or tan, other than hands & face **utd**

Complexion **utd**  
(light, med. dark, clear, pimples, pocks, freckles)

Build **large bones**  
(large, fat, thin, muscular)

Hair **utd**  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).



Faint, illegible text covering the majority of the page, appearing to be a document or report.



Hair **utd**  
(baldness, widows peak, distinctive cutting or other characteristics).

Sideburns **utd** (color, setting, shape) Mustache **utd** (color, size, shape) Beard or **utd** (length, heavy)

Goatee **utd**  
(light, color, extent)

Eyes **utd** (color, setting, shape) Eyebrows **utd** (color, bushiness, extent across nose)

Nose **utd** (size, shape, straight) Ears **utd** (size, set close to or far from head)

Mouth **rather small inside** (large, medium, small) Lips **utd** (small large, full)

Teeth **see tooth chart**  
(white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin **utd**  
(proninent, receding, pointed, dimple, double)

Jaw **normal** (large, small, normal) Circumference of head in inches **utd** (hat band)

Neck **utd** (size, length, short, normal, wrinkled) Larynx **too decomposed** (prominent, normal)

Shoulders **utd** (broad, straight, small, rounded) Arms **utd** (length, muscular, color)

**utd**  
(extent and quantity of hair)

Hands **utd**

Fingers **too decomposed**  
(short, thick, long, slender, size of knuckles, missing fingers or joints)

**utd**  
(Unusual characteristics of fingernails)

Chest **utd**  
(size of nipples, color, quantity & extent of hair, large, small normal)

Back **utd** (quantity & extent of hair) Aist **utd** (size of navel, appendectomy, amount)

**utd** (quantity & color of hair) Circumcision **utd** (yes-no) Pubic hair **utd** (color)

Hernioplasty **utd**  
(yes-no; location)

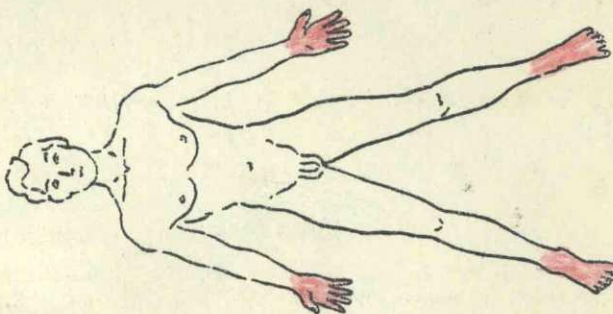
Legs **utd**  
(inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

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Feet shoe size 10 Toes utd  
(size, corns, callouses, flat) (slender, straight, crooked, overlap)

Evidence of healed factures none  
(nose, arms, legs, etc.)

9. Black out parts of body not received at cemetery :



10. Have fingerprints been placed on Report of Interment no  
(yes-no)

If not, explain fingers missing

11. Has tooth chart been prepared yes If not, explain  
(yes-no)

12. Remarks : **This body consists of a complete skeleton, except for bones of hands and feet which are missing, skull crushed but teeth are present. Bones are large and heavy. Particularly unusual was the sternum, a very large manubrium; and its over-all length almost half again size of normal man. Approx. weight of remains 35 lbs. No flesh at all with skeleton. One Identification Tag found with remains / impression below. Clothing marks found on raincoat and jacket ans helmet and do not agree with serial number on Identification Tag.**

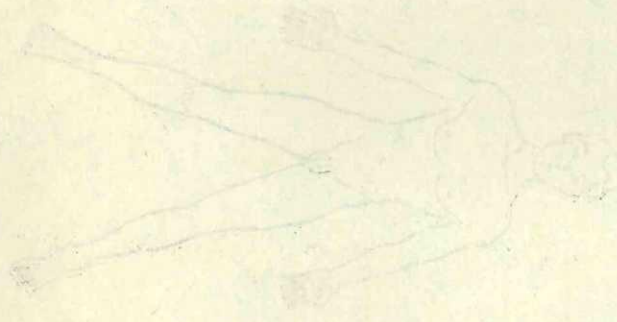
I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

**NATHAN F. DRAKE**  
**O-382849 T 42 A**  
**Mrd. W.M. Drake**  
**RED & GROVE RD**  
**VINELAND, NJ P**

*Robert A. Salvador*  
**Robert A. Salvador**  
Officer's Name

**Captain Inf.**  
Rank Service

**Central Identification Point**  
Organization



Faint, illegible text, possibly bleed-through from the reverse side of the page. The text is mostly centered and spans several lines.

I recall that I investigated toward the manner of death... and all remaining information...  
has been recorded to the best of my knowledge.



Faint text, possibly a signature or name, located below the second sketch.

Faint text, possibly a date or reference number, located below the signature.

G. R. & E. DIV.  
 OFFICE OF THE CHIEF QUARTERMASTER  
 HQ. COM. ZONE, ETOUSA

### TOOTH CHART

1 Nov. 1946

DRAKE Nathan F. 1st. Lt. 0-382849  
 Last Name First Initial Rank Serial No.  
 St. Avold Cemetery Plot-AAAA Row-2 Grave 21  
 Unit Organization

Place of Death

Date of Death

Cause of Death

Right

Left

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	T MSG.	O A	Ext. A	O.M A	O.D A			M. S. D.				O.D A	O.M A	OM A	Ext. GRANULATED	Ext. GRANULATED
Side views																
TOP																
VIEW																
Side Views																
	T MSG.	O A	O A	LEANS DISTAL				M. S. D.					O A	O A		T MSG.
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

*Paul L. Gravenor*  
 Signature of Officer or other person who prepared Tooth chart  
 Paul L. GRAVENOR US Civilian  
*Robert A. Salvador*  
 Verified by G. R. S. Officer  
 ROBERT A. SALVADOR Capt. Inf.

**MISSING TEETH...** All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:



**CROWNED TEETH...** Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:



**BRIDGE WORK...** Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



**FILLINGS...** Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:



**CARIES (CAVITIES)...** Outline location and size of cavity, shade in thus:



**DENTURES (PLATES)...** Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".

**ADDITIONAL SPACE FOR FURTHER REMARKS**

Note:

- Teeth long, fully erupted, show signs of wear on occlusal surface.
- Thin roots and wide crowns ( Occusal surface )
- Space between teeth at gum line 1/8 inch.
- No space between teeth at occusal surface.
- Lower teeth lean slightly mesially and lingually.
- R-13 leans distally.
- All fillings silver.
- R-8, 16, L-8, 16 either have been extracted and granulated fully or not yet erupted.

10011 CHYKI

23 March 1949

1/Lt. Nathan F. Drake, ASN 0-382 849  
Plot A, Row 28, Grave 39  
Headstone: Cross  
St. Avold (France) U. S. Military Cemetery

Mrs. Edith K. Drake  
1894 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H. FELDMAN  
Major General  
The Quartermaster General

MAR 24 1 23 PM '49

O. C. H. G.  
MAIL & RECORDS BRANCH

oey

23 March 1949

1. Lt. Nathan T. Drake, ASN O-382 849  
Plot A, Row 23, Grave 19  
Headstone: Cross  
St. Avola (Thomas) U. S. Military Cemetery

Mrs. Edith E. Drake  
1824 Berkeley Avenue  
San Bernardino, California

Dear Mrs. Drake:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with other graves who also gave their lives for their country. Quarterly military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent conservation and beautification of the cemetery, including erection of the permanent headstones. The headstones will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, state, and date of death. Any inscriptions relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H. BELMONT  
Major General  
The Quartermaster General

Mr. Drake  
1824 Berkeley Avenue  
San Bernardino, California

007



243 Drake, Nathan (0-382849)ms

## REPORT OF PHYSICAL EXAMINATION

(See AR 40-100 and 40-105)

Instructions.—Unless otherwise prescribed, this form will be used for all physical examinations of officers, nurses, or warrant officers; applicants for appointment as such in the Regular Army, National Guard, or Officers' Reserve Corps; and enrollment in the Reserve Officers' Training Corps. Use typewriter if practicable. Attach plain additional sheets if required.

1. Drake, Nathan (None?) 0-382849  
(Last name) (First name) (Middle initial) (Serial number)

2. 2nd Lieut. Inf-Res Age 25 Years of service 0  
(Grade) (Organization and arm or service) (Nearest birthday) (Whole number only)

3. Nature of examination<sup>1</sup> Extended Active Duty Component of Army<sup>2</sup> O.P.C.

4. Typhoid vaccination. No. series completed One Last series 1939, 19

5. Date of last smallpox vaccination 1939 Type of reaction Immune

6. Other vaccination or immunity tests None

7. Medical history<sup>3</sup> Usual childhood diseases. Tonsillectomy, 1935. Pilonidal cystectomy, 1937.  
No serious illnesses or injuries. Believes himself to be in good health.

8. Eyes Simple myopia, bilateral. Wears glasses.  
Distant vision: Right 20/50 correctible to 20/20 by + plus 1.50  
(Snellen type) Left 20/65 correctible to 20/20 by + plus 1.50  
Near vision: Right J# 1 correctible to J# by +  
(Jaeger type) Left J# 1 correctible to J# by +  
Refraction<sup>4</sup> (under cycloplegic): Right Not available Left  
Color perception (red and green)<sup>5</sup> Normal Normal

9. Ears Normal  
Hearing (low conversational voice): Right 20/20 Left 20/20 Audiometer (percent loss): Right Left

10. Nose and throat Normal

11. Teeth:<sup>7</sup> Right (Examinee's) Left  
8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8  
16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16  
Indicate: Restorable carious teeth by O; nonrestorable carious teeth by /; missing natural teeth by X.

Remarks, including other defects None Classification IV

Prosthetic dental appliances None

12. Posture Good Figure Medium Frame Medium  
(Excellent, good, fair, bad) (Slender, medium, stocky, obese) (Light, medium, heavy)

13. Temperature 98.6 Height 69-3/4 inches. Weight 151 pounds. Chest: Rest 37 1/2 inches; inspiration 39 inches;  
expiration 36 1/2 inches. Abdomen 31 inches.

14. Cardiovascular system: Heart Normal  
Blood pressure: S. 120 D. 80 Pulse: Rate—Sitting 72 Immediately after exercise 104  
Two minutes after exercise 72 Character Regular - full  
Arteries Normal Varicose veins None

15. Respiratory system Normal

16. X-ray of chest<sup>8</sup> Normal throughout

17. Skin and lymphatics Normal Endocrine system Normal

18. Bones, joints, and muscles Normal Feet Normal

19. Abdominal viscera Normal

20. Hernia None Hemorrhoids None

<sup>1</sup> Appointment, promotion, retirement, annual, active duty, special.<sup>2</sup> Regular Army, National Guard, Officers' Reserve Corps, Reserve Officers' Training Corps.<sup>3</sup> If annual physical examination, record only for past year.<sup>4</sup> If annual physical examination, record only distant and near vision, and state whether defect is properly corrected.<sup>5</sup> When indicated.<sup>6</sup> Not required for annual physical examination.<sup>7</sup> If rejected for appointment in Regular Army because of malocclusion, send plaster models to the Surgeon General.<sup>8</sup> Required for candidates for commission.FILE 1742  
REC - 630 BRC 1487



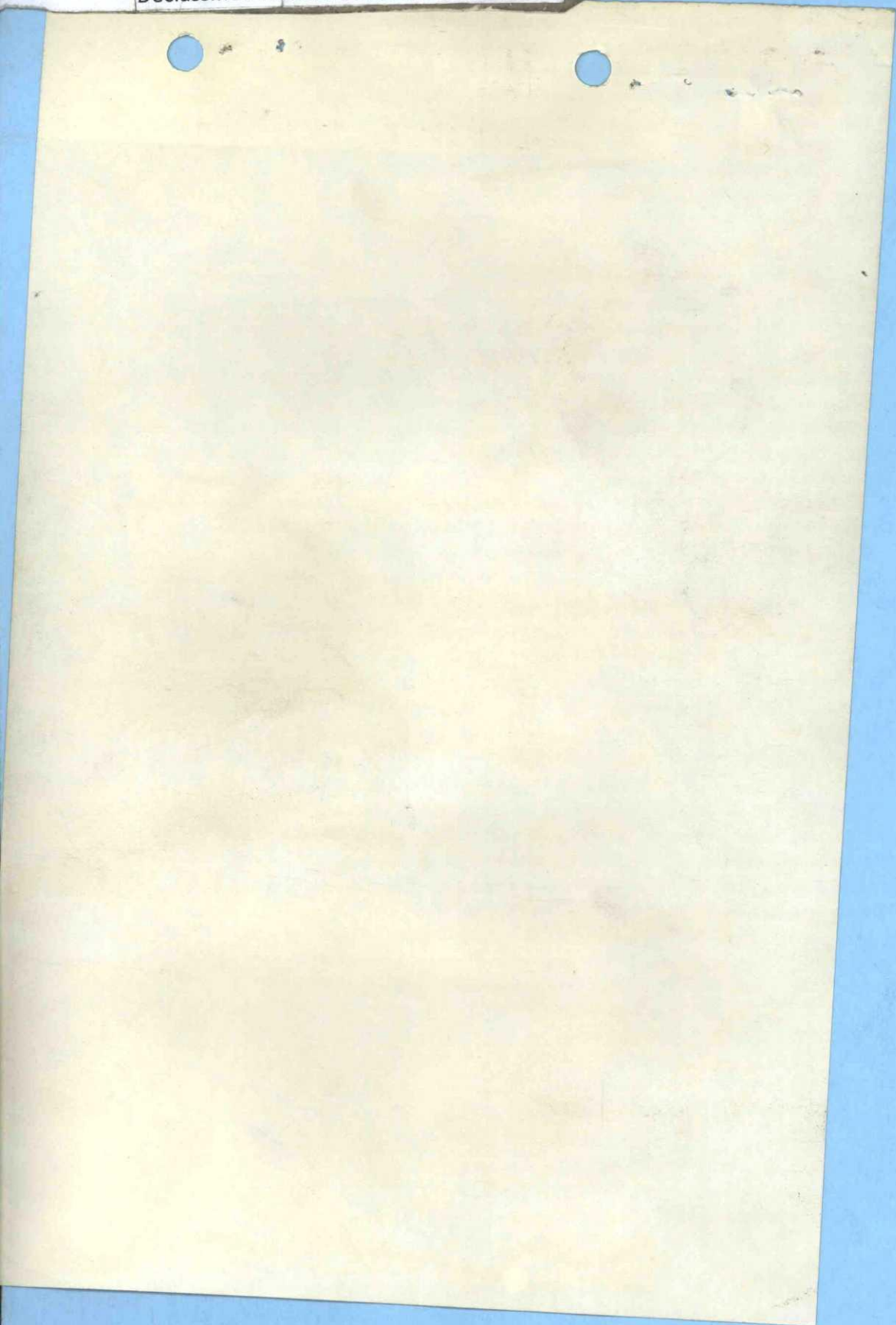
21. Genito-urinary system Normal  
 22. Nervous system Normal  
 23. Laboratory procedures: Kahn Negative Wassermann Not reported  
 Urinalysis: Sp. gr. 1.023 Albumin None Sugar None  
 Microscopical (if indicated) Normal  
 Other laboratory procedures None  
 24. Remarks on defects not sufficiently described None

25. Corrective measures, or other action recommended None  
 26. Is the individual permanently incapacitated for active service? No  
 If yes, specify defect  
 27. If applicant for appointment: Does he meet physical requirements? Yes Do you recommend acceptance with minor physical defects? Yes If rejection is recommended, specify cause  
 28. Examinee states he is not drawing a pension, disability allowance, or compensation or retired pay from the U. S. Government. If yes, state disability

Station Hospital Fort Du Pont, Delaware A. G. Compton, Lieut. Col., Medical Corps.  
 (Place) (Name and grade)  
December 11, 1941 19 E. A. Cosgrove, Captain, Medical Corps.  
 (Date) (Name and grade)  
B. J. Ciliberti  
E. J. Ciliberti, 1st Lieut., Medical Corps.  
 (Name and grade)  
 1st Ind.<sup>2</sup>

Headquarters  
 To the Commanding General  
 Remarks and recommendations  
 (Name)  
 (Grade) (Organization and arm of service)  
 Commanding

AND CA, 31, NY DEC 24 41 2d Ind.<sup>2</sup>  
 19 Physically qualified. To The Adjutant General.  
 For the Commanding General  
 DAVID D. WAUGH  
 1st Lieut., MC



IDENTIFICATION SECTION  
MEMORIAL DIVISION

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL			ARMY SERIAL NUMBER		GRADE										
Drake, Nathan F.			0-382 849		1st Lt.										
HEIGHT	WEIGHT	COLOR EYES	COLOR HAIR	SHOE SIZE	DATE OF DEATH										
69 3/4"	151	-----Not Shown-----	-----	-----	8 Sep 1944										
LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED (Give complete designation)															
Company F, 11th Infantry, APO 5, c/o PM, New York, N.Y.															
PLACE OF DEATH OR PLACE LAST SEEN IF MIA															
In France															
LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.															
STATION			DATES												
FRACTURES AND/OR BREAKS			TATTOOS AND/OR BIRTH MARKS												
None			None												
DENTAL CHART Taken from WD AGO Form 63, 11 Dec 41															
x	7	x	5	4	3	2	1	1	2	3	4	5	6	x	x
UPPER RIGHT								UPPER LEFT							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	xx
LOWER RIGHT								LOWER LEFT							
x - EXTRACTED						0 - CARIOUS						/ - CARIOUS NON-RESTORABLE			

IDENTIFICATION SECTION  
MEMORIAL DIVISION

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL <b>Drake, Nathan T.</b>	LOW SERIAL NUMBER <b>0-382 840</b>	DATE OF BIRTH <b>1st Lt.</b>	REGIMENT <b>1st</b>	COMPANY <b>1st</b>	GRADE <b>1st Lt.</b>
PLACE OF BIRTH OR LAST BIRTH PLACE <b>In France</b>					
LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED (GIVE COMPLETE HEADQUARTERS ADDRESS) <b>Company F, 11th Infantry, APO S, c/o FM, New York, N.Y.</b>					
DATE OF DEATH OR LAST DATE IN MILITARY SERVICE <b>8 Sep 1918</b>					
DATE OF DEATH OR LAST DATE IN MILITARY SERVICE (IF DIFFERENT FROM ABOVE) <b>Not shown</b>					
STATION					
FEATURES AND/OR MARKS					
<b>None</b>					
DENTAL CHART Taken from WD AGO Form 57, 11 Dec 41					
X	X	X	X	X	X
X	X	X	X	X	X

CMB BHR

1		USMC, ST. AVOLD, FRANCE		Buried at deceased Left: LOUISE ALGIE	
		Plot A, Row 28, Grave 39		36394021 PVT	
		Date reburied: 13 Jan 49		RIGHT: BRANT DALE E	
		DEWEY R. BELL		0-767427 1 LT	
SECTION A -		1st Lt. CAV		DIRECTIVE NUMBER	
NAME AND BURIAL LOCATION OF DECEASED		3574 03146		DATE	
				15 12 47	
				DAY MONTH YEAR	
NAME		SERIAL NUMBER		RANK	
DRAKE, NATHAN F		0-382849		1 LT 1	
CEMETERY		DISPOSITION OF REMAINS		DATE OF DEATH	
ST AVOLD - METZ		1 3503 80		DAY MONTH YEAR	
				CODE DIST. PT.	
PLOT		ROW		GRAVE	
4A		2		21	
COUNTRY		CAUSE OF DEATH		1	
FRANCE					
SECTION B - CONSIGNEE AND NEXT OF KIN					
NAME AND ADDRESS OF CONSIGNEE			NAME AND ADDRESS OF NEXT OF KIN		
ST. AVOLD, FRANCE			EDITH K. DRAKE (WIFE) JAN 17 1949		
			1894 PERSHING AVENUE		
			SAN BERNARDINO, CALIFORNIA		
			(Flag sent)		
SECTION C - DISINTERMENT AND IDENTIFICATION					
NAME		SERIAL NUMBER		DATE OF DEATH	
DRAKE Nathan F		0-382849		2 Aug 48	
DATE DISTINTERRED		RELIGION		IDENTIFICATION VERIFIED BY	
		P		Anthony J Martin	
IDENTIFICATION TAG ON		ORGANIZATION		NAME AND TITLE	
<input checked="" type="checkbox"/> REMAINS		USAGF		Embalmer	
<input checked="" type="checkbox"/> MARKER EMB					
SECTION D - PREPARATION OF REMAINS FOR SHIPMENT					
NATURE OF BURIAL			CONDITION OF REMAINS		
Remnants of Ground Forces Uniform			Fractured skull - Skeletal form		
OTHER MEANS OF IDENTIFICATION					
Identification tag found with remains					
MINOR DISCREPANCIES					
None					
REMAINS PREPARED AND PLACED IN CASKET					
DATE		BY		Anthony J Martin, Embalmer	
10 Aug 48					
CASKET SEALED BY		EMBALMER (Signature)			
Anthony J Martin, Embalmer		Anthony J Martin			
CASCKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY			
		All markings, plates & tags verified by:			
DATE 10 Aug 48		H MEAD, Capt CWS			
BY Anthony J Martin					
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.					
Final casketing by:					
H MEAD Capt CWS					
H MEAD, Capt CWS, 7857 AGRC, Zone 3 Hq.					
SIGNATURE OF GRS INSPECTOR					
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.					

QMC FORM 1194

REV 15 MAR 46

FINAL LETTER SENT 23 MAR 1949

1184  
MAY - JUNE 2011 33 MAY 1983

### RECORD OF CUSTODIAL TRANSFER

#### 1. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

#### 2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

#### 3. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

#### 4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

#### 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

#### 6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

#### 7. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

BHB



# REQUEST FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, ARMY SERIAL NUMBER, AND REPORTED PLACE OF BURIAL

DATE:

1st Lt. Nathan F. Drake, O 382 849  
Plot AAAA, Row 2, Grave 21,  
United States Military Cemetery  
St. Avold, France

18 October 1947

A	C
B	D

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.  
If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

## PART I

1. Edith K. Drake  
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

(Please indicate relationship to the deceased by placing an "X" in the proper box.)

- WIDOW       WIDOWER       SON OVER 21 YEARS OLD       DAUGHTER OVER 21 YEARS OLD
- FATHER       MOTHER       BROTHER OVER 21 YEARS OLD       SISTER OVER 21 YEARS OLD
- RELATIONSHIP OTHER THAN ABOVE (Specify) \_\_\_\_\_

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected.)

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS. St Avold, France
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO \_\_\_\_\_ THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT \_\_\_\_\_

(FOREIGN COUNTRY)

(LOCATION OF CEMETERY SELECTED)

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT \_\_\_\_\_

(LOCATION OF NATIONAL CEMETERY SELECTED)

(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

- YES       NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)

None

DR proc. 15 Jan 48

Coded 15 Dec 47  
Hallagher

OQMG FORM 14 NOV 1946 345 MILITARY

16-50411-1

NOV 28

PAGE 1

*gk*

## PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

LAST NAME	FIRST NAME	MIDDLE INITIAL	
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE No.

OR

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE No.

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)\*

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Edith K. Drake (SIGNATURE OF NEXT OF KIN)      1894 Pershing Ave. (STREET AND NUMBER)  
Edith K. Drake (NAME PRINTED OR TYPED)      San Bernardino, Calif. (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 28<sup>th</sup> day of Oct.,  
 1947, at city (or town) of San Bernardino, county of San Bernardino, and State (or Territory or  
 District) of California.

\*NOTE.—Page 4 is part of the notarial attestation.

[Signature]  
 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
Notary Public  
 (OFFICIAL TITLE)  
 My Commission Expires 7-19-49

**PART II RELINQUISHMENT OF DISPOSITION AUTHORITY**

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE \_\_\_\_\_, AS THE NEXT OF KIN OF THE DECEASED  
(PLEASE INSERT RELATIONSHIP)  
NAMED IN PART I OF THIS FORM, DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.  
THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

\_\_\_\_\_  
(DATE)  
\_\_\_\_\_  
(SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)  
\_\_\_\_\_  
(NAME PRINTED OR TYPED) (CITY AND STATE)

**PART III**

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

\_\_\_\_\_  
(DATE)  
\_\_\_\_\_  
(SIGNATURE) (STREET AND NUMBER)  
\_\_\_\_\_  
(NAME PRINTED OR TYPED) (CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

All remarks and information entered here will be considered as part of the Notarial Attestation.

THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:  
NAMED IN PART OF THE FORM, TO HERBY REINFORCE MY RIGHT TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEDENT  
AS THE NEXT OF KIN OF THE DECEDENT

LAST NAME	FIRST NAME	MIDDLE INITIAL

WHICH UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEDENT.



AIRMAIL

DEPARTMENT OF THE ARMY  
////////////////////

*Ref*

QMGM 293  
Drake, Nathan F.  
SN O 382 849

21 NOV 1947

SUBJECT: Burial Records

TO: Commanding General  
American Graves Registration Command  
European Area  
APO 58, c/o Postmaster  
New York, New York

1. Request the burial report and grave marker for the following decedent, interred in the United States Military Cemetery St. Avold, France, be changed to read as underscored:

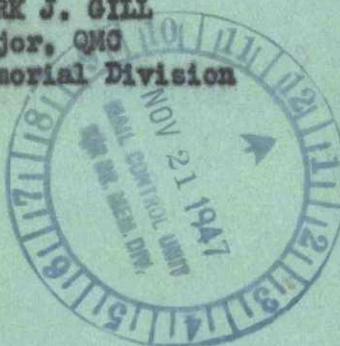
NAME	RANK/ GRADE	SERIAL NO.	RACE	PLOT	ROW	GRAVE
Drake, Nathan F.	1st Lt.	O 382 849	<u>White</u>	AAAA	2	21

2. The records of this office have been reverified with the records of the Adjutant General, Department of The Army, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

Nov 21 1 11 PM '47  
O. Q. M. G.  
MAIL & RECORDS BRANCH

MARK J. GILL  
Major, QMG  
Memorial Division



*MJB*  
MJG  
COB

AIRMAIL

AIRMAIL

DEPARTMENT OF THE ARMY  
REGISTRATION OF GRAVES

DRYDEN 228  
DRYDEN, HANSON V.  
HW O 228 248

21 NOV 1947

SUBJECT: Burial Records

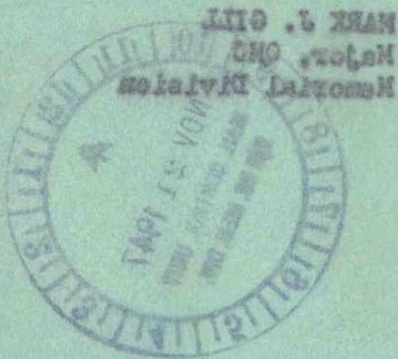
TO: Commanding General  
American Graves Registration Command  
European Area  
APO 88, c/o Postmaster  
New York, New York

1. Request the burial registry and grave marker for the following  
decedent, interred in the United States Military Cemetery St. Avold, France,  
be changed to read as indicated:

NAME	RANK / GRADE	SERIAL NO.	RACE	PICT	HOW	GRAVE
Dryden, Hanson V.	1st Lt.	O 228 248	White	AAAA	S	21

2. The records of this office have been verified with the records  
of the Adjutant General, Department of the Army, and have been found to be  
correct as indicated above.

FOR THE QUARTERMASTER GENERAL



RECEIVED  
O. D. M. C.  
NOV 27 1947

tkp

AIRMAIL

1st Lt. Nathan F. Drake, O 382 849  
 Plot AAAA, Row 2, Grave 21,  
 United States Military Cemetery  
 St. Avold, France

18 October 1947

Mrs. Edith K. Drake  
 1894 Pershing Avenue  
 San Bernardino, California

Dear Mrs. Drake:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARKIN  
 Major General  
 The Quartermaster General

Incls.  
 RW

OCT 24 10 45 AM  
 O. O. H. G.  
 MAIL & RECORDS BRANCH

18 October 1947

1st Lt. Nathan T. Harris, O 382 849  
Pfc AAAA, Row 2, Grave 21,  
United States Military Cemetery  
St. Avold, France

Mrs. Edith E. Harris  
1834 Pershing Avenue  
San Bernardino, California

Dear Mrs. Harris:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quarter-  
Master General of the Army has been entrusted with this sacred responsibility  
to the honored dead. The records of the War Department indicate that you are  
the nearest relative of the above-named deceased, who gave his life in the  
service of his country.

The enclosed pamphlet, "Disposition of World War II Armed Forces Dead,"  
and "American Genealogy," explain the disposition, options and services made  
available to you by your Government. If you are the next of kin according to  
the line of kinship as set forth in the enclosed pamphlet, "Disposition of  
World War II Armed Forces Dead," you are invited to express your wishes as to  
the disposition of the remains of the deceased by completing Part I of the en-  
closed form "Request for Disposition of Remains." Should you desire to retain  
your rights to the next of kinship, please complete Part II of the  
enclosed form. If you are not the next of kin, please complete Part III of the  
enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements  
or other personal arrangements be made until you are further notified by this  
office.

Will you please complete the enclosed form "Request for Disposition of  
Remains" and mail in the enclosed self-addressed envelope, which requires no  
postage, within 30 days after the receipt by you? The prompt return will  
avoid unnecessary delays.

Sincerely,

THOMAS D. HARRIS  
Major General  
The Quartermaster General

RECORDED BY  
OCT 21 10 15 AM '47

Index  
100



23 July 1947

Mrs. Edith K. Drake  
1894 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

292

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late First Lieutenant Nathan F. Drake, A.S.N. 0 382 849.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery St. Avold, plot AAAA, row 2, grave 21. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located twenty-three miles east of Metz, France, and is under the constant care and supervision of United States military personnel.

The War Department has now been authorized to comply, at Government expense, with the feasible wishes of the next of kin regarding final interment, here or abroad, of the remains of your loved one. At a later date, this office will, without any action on your part, provide all legal next of kin with full information and solicit their detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN  
Major General  
The Quartermaster General

csb

JUL 23 1 58 PM '47  
MAIL DELIVERY ROOM

Handwritten mark

23 July 1947

Mr. Keith E. Brown  
1505 Pershing Avenue  
San Bernardino, California

Dear Mr. Brown:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Lieutenant William B. Brown, A.S.M. O 382 849.

The records of this office disclose that his remains are interred at the U. S. Military Cemetery No. 4, Box 4444, Row 2, Grave 23. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located twenty-three miles east of Paris, France, and is under the constant care and supervision of United States Military personnel.

The War Department has now been authorized to comply, at Government expense, with the specific wishes of the next of kin regarding final interment, home or abroad, of the remains of your loved one. As a later date, this office will, without any action on your part, provide all legal next of kin with full information and notify their families desired.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

The Quartermaster General  
Major General  
E. B. JAGGER

*[Handwritten signature/initials]*

ccp

RX CASE - SPECIAL INVESTIGATION SECTION

IDENTIFICATION SECTION  
REPATRIATION RECORDS BRANCH  
MEMORIAL DIVISION

18 Feb 47  
(Date)

O. F. McGarry  
Investigation Clerk

Field Identified as: Drake, Nathan F. 0-382849 1st Lt  
(Name) (Serial No.) (Rank)

Formerly: Unknown X- none U.S.Mil.Cem., St. Avold, France AAAA 2 21  
(Name of Cemetery) Plot Row Grave

Main Points used to establish Identification in Field & verified by Ident. Section:

1. One ID tag found when reprocessed.
2. Personal effects, including 1st Lt Bar Officers Collar insignia, (Inf.)
3. Favorable comparison of tooth charts.
4. (Note: X-43, Hamm Luxembourg, previously identified as Lt Drake have been redesignated as Unk X-43 - see correspondence in file).
5. \_\_\_\_\_

Additional data obtained in this office:

Source: (1) SWA (2) \_\_\_\_\_ (3) \_\_\_\_\_

- (1) Tooth chart submitted for remains in AAAA-2-21, St. Avold, France check as to missing teeth. Tooth chart for remains in Hamm, Luxembourg does
- (2) not check at all.
- (3) \_\_\_\_\_

(Note: If additional space is required, use reverse side)

APPROVED:

*Edward V. Freeman*  
EDWARD V. FREEMAN  
Colonel, QMC

*Earl T. McCulloch*  
EARL T. McCULLOUGH  
Colonel, QMC

CASE FORWARDED TO RECORDS BRANCH w/293 FILE: \_\_\_\_\_  
(Date)

*File*  
**8 MAY 1947**  
*Spickard*

SECRET

[Faint, illegible typed text]

SECRET

(S)

(S)

SECRET

(S)

(S)

(S)

SECRET

SECRET

SECRET

R/R BRANCH, MEMORIAL DIVISION, OQM

# IDENTIFICATION DENTAL CHART

TO BE USED WITH QMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,  
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

1 Nov. 1946  
DATE

DRAKE Nathan F.  
LAST NAME FIRST INITIAL

1st Lt./  
RANK

0-382849  
SERIAL NO.

UNIT *St. Avold.*

ORGANIZATION

PLACE OF DEATH

~~HANM~~ Cemetery

PLACE OF BURIAL

AAAA 2 21  
PLOT ROW GRAVE NO.

RIGHT				UPPER TEETH				LEFT									
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
TYPE															TYPE		
LOCATION															LOCATION		
	$\otimes$	A	$\otimes$	A	A								A	A	A	$\otimes$	$\otimes$
		O		OM	OD								OD	OM	OM		

INSIDE — LOOKING OUT

RIGHT				LOWER TEETH				LEFT								
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
TYPE															TYPE	
LOCATION															LOCATION	
	$\otimes$	A	A											A	A	$\otimes$
		O	O											O	O	

## KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX	TYPE OF FILLING IN UPPER HALF OF BOX	LOCATION OF FILLING IN LOWER HALF OF BOX
$\otimes$ EXTRACTED	A AMALGAM (SILVER)	m MESIAL (BETWEEN-TOWARD FRONT)
$\bigcirc$ CAVITY. INDICATE LOCATION	G GOLD	o OCCLUSAL (BITING SURFACE BACK TEETH)
$\text{---}\text{---}\text{---}$ FIXED BRIDGE (INCL. ABUTMENTS)	S SILICATE OR PORCELAIN	d DISTAL (BETWEEN-TOWARD BACK)
$\text{---}\text{---}\text{---}$ TEETH REPLACED BY DENTURE	O OXYPHOSPHATE (CEMENT)	l LINGUAL (TOWARD TONGUE)
$\otimes$ POSTHUMOUSLY MISSING (LOST AFTER DEATH)		f FACIAL (TOWARD CHEEK)

QMC FORM 1045 5 FEB 46

REVERSE SIDE FOR INSTRUCTIONS

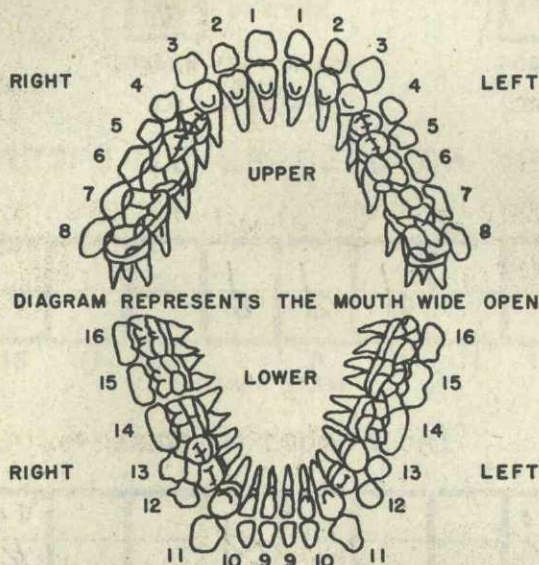
**INSTRUCTIONS:**

1. **ACCURACY AND ATTENTION TO DETAIL** IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. **NOTE CAREFULLY** THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN **WHOLE BOX**; SYMBOLS INDICATING **TYPE OF FILLING** ARE TO BE INSERTED IN **UPPER HALF** OF BOX; AND SYMBOLS INDICATING **LOCATION OF FILLING** ARE TO BE INSERTED IN **LOWER HALF** OF BOX.

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, *e.g.*, PORCELAIN CROWNS, GOLD CROWNS (FULL OR  $\frac{3}{4}$ ),  $\frac{3}{4}$  GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.

**REMARKS:**

Teeth long, fully erupted, show signs of wear on occlusal surface. Thin roots and wide crowns ( occlusal surface ). Space between teeth at gum line  $\frac{1}{8}$  inch. No space between teeth at occlusal surface. Lower teeth lean slightly mesially and lingually. R13 leans distally. All fillings are silver. R-8,16 L-8,16 either have been extracted and granulated fully or not yet erupted.

*John R. Karezman*  
SIGNATURE OF PERSON WHO PREPARED CHART

*Robert A. Salvador*  
VERIFIED BY GRS OFFICER

S/Sgt/ John R. Karezman  
NAME AND RANK TYPED OR PRINTED

ROBERT A. SALVADOR.  
NAME AND RANK TYPED OR PRINTED

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

DATE

*C*

(Basic ltr OQMG, Sub. Exhumation of Remains, date 16 Sept 46)

RRE

1st Ind

Hq, American Graves Registration Command, HFA, APO 887, US Army 21 Nov 46

TO: The Quartermaster General, Washington 25, D C

1. Attached herewith are QMG Form 1045 and AGRC Form 11 in lieu of QMG Form 1044.

*29*

2. Your attention is invited to Report of Burial forwarded your headquarters on Transmittal Letter No. 2020 dated 29 August 1946 re-designating 1st Lt. Nathan F. DRAKE, O-382849 "previously identified on the basis of similarity in height, weight, trousers size, type of wound and place of death" now interred in Hamm Cemetery, Plot K, Row 3, Grave 56, as unknown X-43.

3. At this time the identification for 1st Lt. Nathan F. DRAKE, interred in St Avoild Cemetery, Plot AAAA, Row 2, Grave 21, is considered sufficient and no further action will be taken to change the records of this headquarters unless further notification is received from your headquarters.

FOR THE COMMANDING OFFICER:

2 Incls

1 - QMG Form 1042 (Dupl.)

2 - AGRC Form 11 (Dupl.)

EDWARD F. PRICE

Capt, QMG

Actg Asst Adj Gen



*File*  
*8 MAY 1947*  
*R Jackson*

(Re: 1st Lt. GORD, Sub. Examination of Remains, Date 18 Sept 48)

1st Lt

HR

Mr. American Graves Registration Command, USA, APO 967, US Army XI Nov 48

TO: The Quartermaster General, Washington 25, D C

I. Attached herewith are GAO Form 1043 and AGHC Form II in lieu of GAO Form 1044.

2. Your attention is invited to Report of Burial Forwarded your headquarters on Transmittal Letter No. 3030 dated 29 August 1948 re-assigning 1st Lt. Nathan F. DEANE, O-322844, previously identified on the basis of similarity in height, weight, weapons size, type of wound and place of death, now interred in Ham Cemetery, Plot K, Row 2, Grave 86, as unknown X-43.

3. At this time the identification for 1st Lt. Nathan F. DEANE, interred in St Auld Cemetery, Plot AAAA, Row 2, Grave 21, is considered sufficient and no further action will be taken to change the records of this headquarters unless further notification is received from your headquarters.

FOR THE COMMANDING OFFICER:

EDWARD T. FRIGG  
Capt.  
Asst Asst Adj Gen

3 Incls  
1 - GAO Form 1043 (Data.)  
2 - AGHC Form II (Data.)

RECEIVED  
MAY 1949



QMGYB 293  
 DRAKE, Nathan F.,  
 ASN 0-382849

16 September 1946

SUBJECT: Exhumation of Remains

TO : Commanding General, American Graves Registration Command  
 European Theater Area, Versailles, France  
 APO 887, c/o Postmaster, New York, New York

1. Reference is made to the two reports of burial submitted to this office covering burial of Nathan F. Drake, 1st Lt., 0-382849 as follows:

- (a) Report of Burial dated April 1945, identifying Unknown X-43, USMC Hamm, Luxembourg, Plot K, Row 3, Grave 56 as 1st Lt. Nathan F. Drake, 0-382849, 11th Inf. Regt., on the basis of similarity in height, weight, trousers size, type of wound, and place of death.
- (b) Report of Interment dated 11 May 1946, identifying remains buried in Plot AAAA, Row 2, Grave 21, USMC St. Avold, as 1st Lt. Nathan F. Drake, 0-382849, Infantry, identification having been established by Identification tag.

2. Paragraph 1 - 1b, 3d Ind., Hqs 2nd Bn, 11th Inf., dated 5 January 1945, to Commanding Officer, 11th Infantry, signed by Ferris A. Church, Major, Infantry, Investigating Officer, states in part "Death occurred near Dornot, France, MR 1/100,000, Central Europe, Searbrucken, Sheet V-1, 798512, approximately 20 yards from southwest corner of the moat at Fort St Blais of the Verdun Group". In view of this statement it would appear that the remains buried in St. Avold, are those of Lt. Drake; however, in view of the above facts it is requested that the remains in each grave be disinterred in the presence of a medical officer and the inclosed Forms 1044 and 1045 be accomplished in accordance with instructions set forth on the reverse side of these forms. Upon completion thereof, it is further requested that the tooth charts, together with reports of disinterment be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

2 Incls:

- 1 - QMC Form 1044 (Dupl.)
- 2 - QMC Form 1045 (Dupl.)

JAMES C. MacFARLAND  
 Major, QMC  
 Assistant

*File*  
 MAY 1947  
*B. Jackson*

16 September 1945

ASSY 0-38289  
STAKE, Nathan E.  
1945 123

SUBJECT: Examination of Remains

TO : Commanding General, American Graves Registration Command  
European Theater Area, Versailles, France  
APO 977, c/o Postmaster, New York, New York

1. Reference is made to the two reports of burial submitted to this office covering burial of Nathan E. Stake, last file # 0-38289 as follows:

(a) Report of burial dated April 1945, identifying Unknown X-13, USMC, known as Nathan E. Stake, O-38289, 1150 Grave 26 as last Lt. Nathan E. Stake, O-38289, 1150 Int. Regt., on the basis of similarity in height, weight, complexion, type of wound, and place of death.

(b) Report of interment dated 11 May 1945, identifying remains buried in Plot AAA, Row 3, Grave 21, USMC, 82. Avoid, as last Lt. Nathan E. Stake, O-38289, 1150 Int. Regt., identification having been established by identification tag.

2. Paragraph 1 - 12, 3d Int. Regt. 1150 Int. Regt., dated 2 January 1945, to Commanding General, 1150 Int. Regt., signed by Major A. (unintelligible), Investigating Officer, states in part that an incident occurred near Pointe du Hoc, France, on 12 June 1944, approximately 30 yards from southeast corner of the most of Fort de Mala de la Vierge Battery. In view of this statement it would appear that the remains buried in 82. Avoid, are those of Lt. Stake; however, in view of the above facts it is requested that the remains in each grave be identified in the presence of a medical officer and the enclosed forms 1044 and 1045 be completed in accordance with instructions set forth on the reverse side of these forms. Upon completion thereof, it is further requested that the teeth charts, together with reports of disinterment be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL

*Handwritten signature and initials*

MAJOR C. DEWANE  
Major, CGM  
Assistant

2 Incls:  
1 - GRC Form 1044 (Encl.)  
2 - GRC Form 1045 (Encl.)

**IDENTIFICATION SECTION  
MEMORIAL DIVISION**

**IDENTIFICATION DATA**

LAST NAME - FIRST NAME - MIDDLE INITIAL <i>Drake, Nathan F.</i>			ARMY SERIAL NUMBER <i>0382849</i>		GRADE <i>1ST LT.</i>
HEIGHT <i>70"</i>	WEIGHT <i>154</i>	COLOR EYES	COLOR HAIR <i>NOT OF RECORD</i>	SHOE SIZE	DATE OF DEATH
LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED ( <i>Give complete designation</i> ) <i>RELIGIOUS PREFERENCE - PROTESTANT</i>					
PLACE OF DEATH OR PLACE LAST SEEN IF MIA					

LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.

STATION	DATES

FRACTURES AND/OR BREAKS

TATTOOS AND/OR BIRTH MARKS

DENTAL CHART *2 Mar 42*

*X* 7 *X* 5 4 3 2 1

UPPER RIGHT

1 2 3 4 5 6 *X X*

UPPER LEFT

16 15 14 13 12 11 10 9

LOWER RIGHT

9 10 11 12 13 14 15 16

LOWER LEFT

X - EXTRACTED

O - CARIOUS

I - CARIOUS NON-RESTORABLE

*See Form 79 attached.*

*File*  
**3 MAY 1947**  
*[Signature]*

IDENTIFICATION SECTION  
MEMORIAL DIVISION

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL DRAKE, HARRY L.		ARMY SERIAL NUMBER		GRADE
WEIGHT	HEIGHT	COLOR EYES	COLOR HAIR	SHOE SIZE
PLACE OF BIRTH OR PLACE LAST SEEN IN MILITARY SERVICE				
LIST ALL CAMPS IN WHICH STATIONED IN MILITARY SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH				
STATION		DATE		

PHOTOGRAPH NUMBER		TATTOO NUMBER WITH MARKS		
-------------------	--	--------------------------	--	--

DENTAL CHART

UPPER RIGHT	1	2	3	4	5	6	7	8	9	10	11	12
UPPER LEFT	1	2	3	4	5	6	7	8	9	10	11	12
LOWER RIGHT	1	2	3	4	5	6	7	8	9	10	11	12
LOWER LEFT	1	2	3	4	5	6	7	8	9	10	11	12

X - EXTRACTED  
O - CARIOUS  
V - CANINO NOT RESTORABLE



**\*REPORT OF DENTAL SURVEY**

**UPPER TEETH**

Right								Left							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X		X												X	X

**LOWER TEETH**

Right									Left						
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
															X

CLASS IV

Occlusion Fair: Calculus: Slight, Medium, Heavy

Periodontoclasia no

Dental foci suspected: Yes No

Other conditions normal

Date May 18, 1947

L.F. Sacks

1st Lt Dental Corps, U. S. A.

\*Restorable carious teeth by O  
Nonrestorable carious teeth by /  
Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

X	X	X
---	---	---

Teeth replaced by fixed bridge (oval to include abutments) 

○	X	○
---	---	---

AGRC  
FORM No. 11  
Revised 5 January 1946

## CHECK LIST OF UNKNOWNNS

(to be completely filled out and attached to each copy of Report of Interment  
WD QMC Form 1042)

~~Unknown~~ X Nathan F. Drake  
Cemetery St-Avold U.S. Mil. Cem. (Q. 260584)  
Plot AAAA Row 2 Grave 21

1. ~~Arrived at cemetery~~ Reprocessed 1 November 1946  
(hour) (date)
2. Place of death \_\_\_\_\_  
(name of closest town) (coordinates and letter Prefex, maps)  
(Sheet, scale and serials used)
3. Remains recovered ~~at cemetery~~ and reprocessed by Central Identification Point  
(name and organization)
4. Evacuated to Cemetery by \_\_\_\_\_  
(name and organization)

5. **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

	Clothing Markings	Sizes	Indicate unusual markings Color wear, tear, repairs, etc.
--	----------------------	-------	--

- | Item                     |  |  |  |
|--------------------------|--|--|--|
| *Headgear                | 1 steel helmet and liner, markings on inside steel helmet S-9905 - A white Lt's bar on front covered by a red diamond painted over it (Same on liner). A white rectangle vertically painted on rear of helmet. |  |  |
| Raincoat                 | 1 G.I. raincoat, medium size, markings " <del>Simon</del> " markings in purple indelible ink hard to distinguish. Referred to Laboratory for verification.   |  |  |
| <del>Overcoat</del>      |  |  |  |
| <del>Jacket, Field</del> |  |  |  |
| Jacket, Combat           | remnants of 1 Tanker's jacket (zipper front style) - Markings apparently "ORNE" in purple indelible ink hard to distinguish - Referred to Laboratory for verification.   |  |  |
| <del>Knitwear</del>      |  |  |  |
| <del>Sweater</del>       |  |  |  |
| Jacket, HBT              | none   |  |  |
| *Shirt, Wool OD          | none   |  |  |
| Undershirt, Wool         | none   |  |  |
| Undershirt, Cotton       | none   |  |  |
| Trousers HBT             | none   |  |  |
| *Trousers, Wool OD       | none   |  |  |

File  
8 MAY 1947  
*A. Jackson*

# CHECK LIST OF UNKNOWN

This list is intended to provide a check list of unknown items for the purpose of identifying and classifying them. The items listed are those which have been identified as unknown by the Department of Defense and are being listed for your information.

The items listed are:

- 1. [Illegible]
- 2. [Illegible]
- 3. [Illegible]
- 4. [Illegible]
- 5. [Illegible]
- 6. [Illegible]
- 7. [Illegible]
- 8. [Illegible]
- 9. [Illegible]
- 10. [Illegible]
- 11. [Illegible]
- 12. [Illegible]
- 13. [Illegible]
- 14. [Illegible]
- 15. [Illegible]
- 16. [Illegible]
- 17. [Illegible]
- 18. [Illegible]
- 19. [Illegible]
- 20. [Illegible]
- 21. [Illegible]
- 22. [Illegible]
- 23. [Illegible]
- 24. [Illegible]
- 25. [Illegible]
- 26. [Illegible]
- 27. [Illegible]
- 28. [Illegible]
- 29. [Illegible]
- 30. [Illegible]
- 31. [Illegible]
- 32. [Illegible]
- 33. [Illegible]
- 34. [Illegible]
- 35. [Illegible]
- 36. [Illegible]
- 37. [Illegible]
- 38. [Illegible]
- 39. [Illegible]
- 40. [Illegible]
- 41. [Illegible]
- 42. [Illegible]
- 43. [Illegible]
- 44. [Illegible]
- 45. [Illegible]
- 46. [Illegible]
- 47. [Illegible]
- 48. [Illegible]
- 49. [Illegible]
- 50. [Illegible]

The above list is intended to provide a check list of unknown items for the purpose of identifying and classifying them. The items listed are those which have been identified as unknown by the Department of Defense and are being listed for your information.



Belt, Web 2 small portions of webbed belt, brass end tab.

Drawers, Wool none

Drawers, Cotton none

Leggins, Wool none (Note unusual lacing) none

Socks, ~~Cotton~~ 1 pair wool

\*Shoes 1 pr. (type) G.I. field shoes, brown size 10

Overshoes none

Web Equipment (Type) 1 ammunition belt and knife sheath

(Other item) 1 thin lenthier strap lixe shoulder strap from camera - remnants of fleece

(Other item) lining front fleece lined jacket. Several rifle grenade cartriges and 38

\*If body is nude, sizes of these items should be computed by measuring the remains. ammunition

6. Chevrons or

Insignia none

(type & location : shirt, jacket, coat, helmet)

Shoulder Patch none

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces

Ground Forces

8. Description of Remains :

Age utd Height <sup>Approx.</sup> 6' to 6'2" Weight utd Description of wounds skull crushed

Bandages or dressings none Scars utd  
(length, width, location)

Tattoos utd  
(Number, location - illustrate on sep, page)

Outstanding miles, warts or birthmarks utd  
(yes-no ; description, location)

Sunburn or tan, other than hands & face utd

Complexion utd  
(light, med. dark, clear, pimples, pocks, freckles)

Build large bones  
(large, fat, thin, muscular)

Hair utd  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

File  
8 MAY 1947  
Decker

Faint, illegible text, possibly bleed-through from the reverse side of the page. The text is mostly centered and spans most of the page's width.

Hair utd  
(baldness, widows peak, distinctive cutting or other characteristics).

Sideburns utd Mustache utd Beard or utd  
(color, setting, shape) (color, size, shape) (length, heavy)

Goatee utd  
(light, color, extent)

Eyes utd Eyebrows utd  
(color, setting, shape) (color, bushiness, extent across nose)

Nose utd Ears utd  
(size, shape, straight) (size, set close to or far from head)

Mouth rather small inside Lips utd  
(large, medium, small) (small large, full)

Teeth see tooth chart  
(white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin utd  
(proninent, receding, pointed, dimple, double)

Jaw normal Circumference of head in inches utd  
(large, small, normal) (hat band)

Neck utd Larynx too decomposed  
(size, length, short, normal, wrinkled) (prominent, normal)

Shoulders utd Arms utd  
(broad, straight, small, rounded) (length, muscular, color)

utd  
(extent and quantity of hair)

Hands utd

Fingers too decomposed  
(short, thick, long, slender, size of knuckles, missing fingers or joints)

utd  
(Unusual characteristics of fingernails)

Chest utd  
(size of nipples, color, quantity & extent of hair, large, small normal)

Back utd aist utd  
(quantity & extent of hair) (size of navel, appendectomy, amount)

utd Circumcision utd Pubic hair utd  
(quantity & color of hair) (yes-no) (color)

Hernioplasty utd  
(yes-no; location)

Legs utd  
(inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

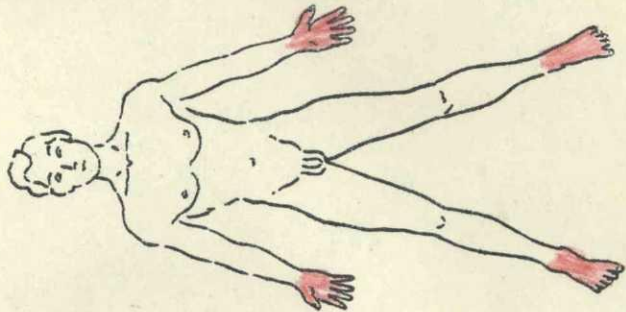
F16  
MAY 1947  
Decker

100-100000

Feet shoe size 10 Toes utd  
(size, corns, callouses, flat) (slender, straight, crooked, overlap)

Evidence of healed fractures none  
(nose, arms, legs, etc.)

9. Black out parts of body not received at cemetery :



10. Have fingerprints been placed on Report of Interment no  
(yes-no)

If not, explain fingers missing

11. Has tooth chart been prepared yes If not, explain  
(yes-no)

12. Remarks : This body consists of a complete skeleton, except for bones of hands and feet which are missing, skull crushed but teeth are present. Bones are large and heavy. Particularly unusual was the sternum, a very large manubrium; and its overall length almost half again size of normal man. Approx. weight of remains 35 lbs. No flesh at all with skeleton. One Identification Tag found with remains / impression below. Clothing marks found on raincoat and jacket ans helmet and do not agree with serial number on Identification Tag.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

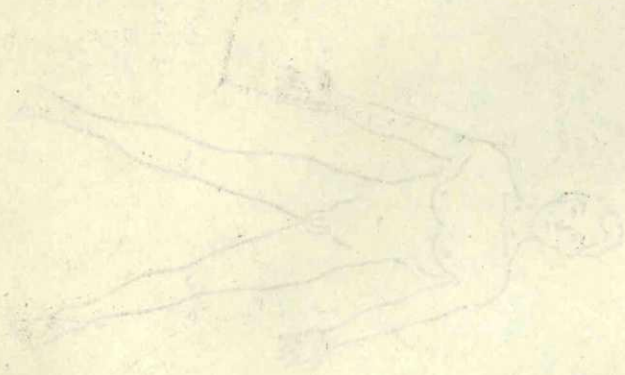
NATHAN F. DRAKE  
O-382849 T 42 A  
Mrs. W.M. Drake  
RED & GROVE RD  
VINELAND, NJ P

*Robert A. Salvador*  
Robert A. Salvador  
Officer's Name

Captain Inf.  
Rank Service

Central Identification Point  
Organization

8 MAY 1947  
*Rackford*



Black out parts of body not treated at autopsy

10 Have fingerprint taken and report in handwriting

If not explain

11 Has teeth short level

12 Remarks: This body consists of a single torso and two legs. The torso is short and broad. The legs are short and thick. The body is covered with a dense covering of hair. The hair is dark and curly. The body is covered with a dense covering of hair. The hair is dark and curly. The body is covered with a dense covering of hair. The hair is dark and curly.

I verify that I have reviewed the records of subject deceased and all available information has been reported to the best of my knowledge.

*[Handwritten signature]*

Special Agent in Charge  
FBI  
Washington, D.C.

RECEIVED  
FBI  
WASHINGTON, D.C.  
JAN 10 1954

*att  
green ltr  
9-16-46*  
293 Drake, Nathan F. (0382849)

(Basic ltr OQMG, Sub. Exhumation of Remains, date 16 Sept 46)

RRE

1st Ind

Hq, American Graves Registration Command, ETA, APO 887, US Army 21 Nov 46

TO: The Quartermaster General, Washington 25, D C

1. Attached herewith are QMC Form 1045 and AGRC Form 11 in lieu of QMC Form 1044.

*293*  
2. Your attention is invited to Report of Burial forwarded your headquarters on Transmittal Letter No. 2020 dated 29 August 1946 re-designating 1st Lt. Nathan F. DRAKE, O-382849 "previously identified on the basis of similarity in height, weight, trousers size, type of wound and place of death" now interred in Hamm Cemetery, Plot K, Row 3, Grave 56, as unknown X-43.

3. At this time the identification for 1st Lt. Nathan F. DRAKE, interred in St Avoild Cemetery, Plot AAAA, Row 2, Grave 21, is considered sufficient and no further action will be taken to change the records of this headquarters unless further notification is received from your headquarters.

FOR THE COMMANDING OFFICER:

*Edward F. Price*  
EDWARD F. PRICE  
Capt, QMC  
Actg Asst Adj Gen

HEADQUARTERS  
A. G. R. C.  
26 NOV 1946  
OUT

2 Incls  
1 - QMC Form 1042 (Dupl.)  
2 - AGRC Form 11 (Dupl.)

MEMORANDUM FOR THE COMMANDING OFFICER  
AGRC  
11 Dec 46  
*Price  
Hawley  
11 Dec 46*

(Base) Mr. O'Neil, Sub. Registration of Deaths, Date of Death 1942

1st Ind

RM

Re: American Graves Registration Commission, HQ, 410 Bldg, US Army, 21 Nov 48

To: The Quartermaster General, Washington 25, D. C.

1. Attached herewith are 4 copies of Form 1045 and 2 copies of Form 1046.

2. Your attention is invited to report of Bureau of Health forwarded your headquarters on 11 November 1948. This report, dated 23 August 1948, is captioned "Identification of Lt. Nathan E. Faxon, O-302443, previously identified as Nathan E. Faxon, O-302443, in 1948. The name, rank, service number, date of birth and place of birth, now located in Hams Cemetery, Plot 1, Row 2, Grave 31, as appears on Form 1045.

3. At this time the identification for Lt. Nathan E. Faxon, O-302443, entered in Hams Cemetery, Plot 1, Row 2, Grave 31, is considered sufficient and no further action will be taken to change the records of this headquarters unless further information is received from your headquarters.

FOR THE QUARTERMASTER GENERAL

ROBERT E. FLYNN  
Capt.  
Actg. Asst. Adj. Gen.

3 Incls  
1 - HQ Form 1045 (Dupl.)  
2 - HQ Form 1046 (Dupl.)



RECORDS BRANCH

DEC 6 10 29 AM '46

MEMORIAL DIVISION



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

IN REPLY REFER TO

OMGYG 293

DRAKE, Nathan F.,  
ASN 0-382849

16 September 1946

SUBJECT: Exhumation of Remains

TO : Commanding General, American Graves Registration Command  
European Theater Area, Versailles, France  
APO 887, c/o Postmaster, New York, New York

1. Reference is made to the two reports of burial submitted to this office covering burial of Nathan F. Drake, 1st Lt., 0-382849 as follows:

(a) Report of Burial dated April 1945, identifying Unknown X-43, USMC Hamm, Luxembourg, Plot K. Row 3, Grave 56 as 1st Lt. Nathan F. Drake, 0-382849, 11th Inf. Regt., on the basis of similarity in height, weight, trousers size, type of wound, and place of death.

(b) Report of Interment dated 11 May 1946, identifying remains buried in Plot AAAA, Row 2, Grave 21, USMC St. Avold, as 1st Lt. Nathan F. Drake, 0-382849, Infantry, identification having been established by Identification tag.

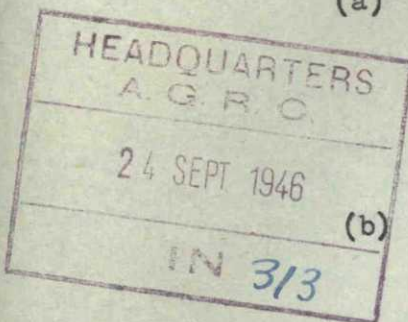
2. Paragraph 1 - 1b, 3d Ind., Hqrs 2nd Bn, 11th Inf., dated 5 January 1945, to Commanding Officer, 11th Infantry, signed by Ferris A. Church, Major, Infantry, Investigating Officer, states in part "Death occurred near Dornot, France, MR 1/100,000, Central Europe, Saarbrucken, Sheet V-1, 798512, approximately 20 yards from southwest corner of the moat at Fort St Blais of the Verdun Group". In view of this statement it would appear that the remains buried in St. Avold, are those of Lt. Drake; however, in view of the above facts it is requested that the remains in each grave be disinterred in the presence of a medical officer and the inclosed Forms 1044 and 1045 be accomplished in accordance with instructions set forth on the reverse side of these forms. Upon completion thereof, it is further requested that the tooth charts, together with reports of disinterment be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

*James C. MacFarland*  
JAMES C. MacFARLAND  
Major, QMC  
Assistant

2 Incls:

1 - QMC Form 1044 (Dupl.)  
2 - QMC Form 1045 (Dupl.)



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

16 September 1946

ASN 0-382849  
DIADE Nathan F.  
200 110000

SUBJECT: Examination of Remains

TO : Commanding General, American Graves Registration Command  
European Theater Area, Versailles, France  
AFG 887, c/o Postmaster, New York, New York

1. Reference is made to the two reports of burial submitted to this office covering burial of Nathan F. Drake, lat la., 0-382849 as follows:

(a) Report of burial dated April 1945, identifying Unknown X-43, USMC Heavy, Luxembourg, Plot K, Row 2, Grave 26 as lat la., Nathan F. Drake, 0-382849, lat. Int. Regt., on the basis of similarity in height, weight, thickness size, type of wound, and place of death.

(b) Report of interment dated 11 May 1946, identifying remains buried in Plot AAAA, Row 2, Grave 21, USMC St. Avold, as lat la., Nathan F. Drake, 0-382849, Infantry, identification having been established by identification tag.

HEADQUARTERS  
24 SEP 1946  
IN 313

2. Paragraph 1 - 1b, 3d Ind., AFM 2nd Ed., 11th Inf., dated 5 January 1945, to Commanding Officer, 11th Infantry, signed by Lewis A. Church, Major, Infantry, Investigating Officer, states in part "Death occurred near Point, France, MR 1,100,000, Central Europe, Saarbrücken, Sheet V-1, 79212, approximately 20 yards from southwest corner of the most of Fort St. Hilaire of the Verdun Group". In view of this statement it would appear that the remains buried in St. Avold, are those of Dr. Drake; however, in view of the above facts it is requested that the remains in each grave be identified in the presence of a medical officer and the included forms 1044 and 1045 be accomplished in accordance with instructions set forth on the reverse side of these forms. Upon completion thereof, it is further requested that the tooth charts, together with reports of disinterment be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

MAIL & RECORDS BRANCH  
O.O.H.G.I.  
LIES G. RECORDS  
SEP 16 3 32 PM '46  
Asst. Dir.

2 Incls:  
1 - GNC Form 1044 (Dupl.)  
2 - GNC Form 1045 (Dupl.)

*att*

QICOM 293  
DRAKE, Nathan F.,  
ASN O-382849

16 September 1946

SUBJECT: Exhumation of Remains

TO : Commanding General, American Graves Registration Command  
European Theater Area, Versailles, France  
APO 887, c/o Postmaster, New York, New York

1. Reference is made to the two reports of burial submitted to this office covering burial of Nathan F. Drake, 1st Lt., O-382849 as follows:

- (a) Report of Burial dated April 1945, identifying Unknown X-43, USMC Hqs, Luxembourg, Plot K, Row 3, Grave 56 as 1st Lt. Nathan F. Drake, O-382849, 11th Inf. Regt., on the basis of similarity in height, weight, trousers size, type of wound, and place of death.
- (b) Report of Interment dated 11 May 1946, identifying remains buried in Plot AAAA, Row 2, Grave 21, USMC St. Avold, as 1st Lt. Nathan F. Drake, O-382849, Infantry, identification having been established by Identification tag.

2. Paragraph 1 - lb, 3d Ind., Hqs 2nd Bn, 11th Inf., dated 5 January 1945, to Commanding Officer, 11th Infantry, signed by Ferris A. Church, Major, Infantry, Investigating Officer, states in part "Death occurred near Dornot, France, MR 1/100,000, Central Europe, Saarbrucken, Sheet V-1, 798512, approximately 20 yards from southwest corner of the most at Fort St Blais of the Verdun Group". In view of this statement it would appear that the remains buried in St. Avold, are those of Lt. Drake; however, in view of the above facts it is requested that the remains in each grave be disinterred in the presence of a medical officer and the inclosed Forms 1044 and 1045 be accomplished in accordance with instructions set forth on the reverse side of these forms. Upon completion thereof, it is further requested that the tooth charts, together with reports of disinterment be forwarded to this office at the earliest practicable date.

QUARTERMASTER GENERAL:

JAMES C. MacFARLAND  
Major, QMC  
Assistant

SEP 16 12 23 PM '46  
MEMORIAL DIVISION  
RECORDS BRANCH

*BoH*

C.O.M.C. & RECORDS BRANCH

SEP 16 3 32 PM '46

ack  
2 Incls:  
1 - QMC Form 1044 (Dupl.)  
2 - QMC Form 1045 (Dupl.)

100-100000-100

100-100000-100

MEMORANDUM FOR THE DIRECTOR

Reference is made to the report of Special Agent in Charge, New York, dated 10/15/54, captioned as above.

The following information was obtained from the report of Special Agent in Charge, New York, dated 10/15/54:

(a) Report of Special Agent in Charge, New York, dated 10/15/54, captioned as above, contains information regarding the activities of the Communist Party, New York, in the area of the City of New York.

(b) Report of Special Agent in Charge, New York, dated 10/15/54, captioned as above, contains information regarding the activities of the Communist Party, New York, in the area of the City of New York.

Paragraph 1 - It is noted that the information contained in the report of Special Agent in Charge, New York, dated 10/15/54, captioned as above, is consistent with the information contained in the report of Special Agent in Charge, New York, dated 10/15/54, captioned as above.

Very truly yours,

RECORDED  
INDEXED

NOV 10 1954



RECORDS BRANCH

SEP 12 15 33 PM '54

MEMORANDUM

WILLIAM J. BROWN

1 - Mr. Tolson (100-100000-100)  
1 - Mr. Boardman (100-100000-100)

100-100000-100

gw

BURIAL INFORMATION

NAME (Last, First, Middle Initial) <i>Drake, Nathan F.</i>	ASN <i>0-382849</i>	GRADE <i>1/LT</i>
ORGANIZATION <i>Inf</i>	DATE OF DEATH <i>2m</i>	
PLACE <i>-</i>	DATE OF BURIAL	DATE OF REBURIAL

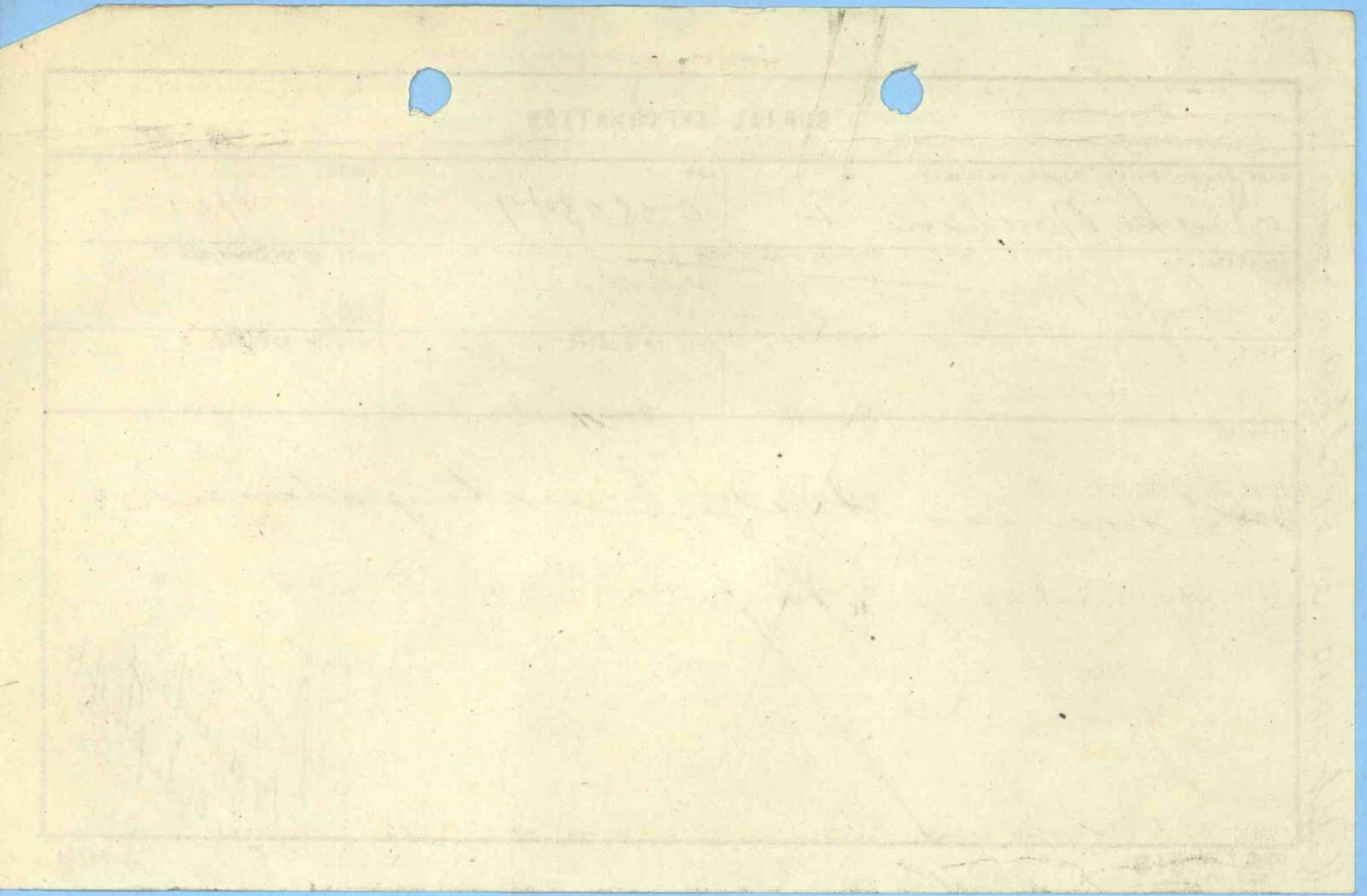
REMARKS

*Case under investigation*

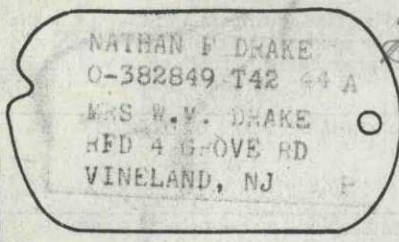
*V. O. [unclear]*

*file  
Hawley  
10 Sept 43*

*Plot #444 - 2-21 St Anne's*



RESTRICTED

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)			DATE OF REPORT 11 May 1946	
Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.			SERIAL No.	
		NAME (Last, first, middle initial) Drake, Nathan F			O-382849	
		GRADE 1st Lt.	ORGANIZATION <del>Unknown</del> 11 Inf Regt	BRANCH OF SERVICE Infantry		
		RACE WHITE <del>Unknown</del>	RELIGION Protestant	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Fort St. Blaise, Fey, Moselle France		CAUSE OF DEATH Unknown			DATE OF DEATH <del>Est. Jan. 1945</del> 3 Sept 44	
EMERGENCY ADDRESSEE (Name, relationship, and address) Mrs. W. M. Drake, Red. 4, Groven Rd. Vineland, N.J.						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) One		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes		<p>LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME</p> <p>One first lieutenants bar, silver. One officers collar insignia, Infantry. One whistle, black, plastic. One pocket knife, black wooden handles. Four keys, padlock type, on chain. One house key, iron. One penknife, two blades with corkscrew. "Forwarded to Effects Depot"</p>				
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY U.S. Military Cemetery (260584) St Avild France						
DATE OF BURIAL 11 May 1946	HOUR 1000	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER Temp. Wooden Cross	PLOT No. AAAA	ROW No. 2	GRAVE No. 21
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Isolated grave near Fort St. Blaise, Fey, Moselle, France Europe Rd Map Sh No 57 1/200,000 (U-804494) Isolated Grave					
TYPE OF RELIGIOUS CEREMONY Protestant	PERSON CONDUCTING BURIAL RITES O. A. Rus er, Capt. O-528621		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes, embossed plate					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) Unknown X-6161			RANK Unk	SERIAL No. Unk	ORGANIZATION Ground Forces	GRAVE No. 20
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Mullen, William B.			RANK Unk	SERIAL No. 38413787	ORGANIZATION Ground Forces	GRAVE No. 22
SIGNATURE OF PERSON PREPARING REPORT Herbert F Shaw WD Civ. <i>Herbert F Shaw</i> Third Field Command AGRC			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Ralph W. Slaughter</i> RALPH W. SLEATOR Major Inf.			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.						

MC 18 JUL 1946

RESTRICTED

**RESTRICTED**

**Section UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**






(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

OTHER IDENTIFICATION CLUES

FILLINGS	 SILVER FILLING GOLD FILLING
CAVITIES	 CAVITY DECAYED
MISSING TEETH	 TOOTH MISSING
CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN
BRIDGE WORK	 GOLD BRIDGE

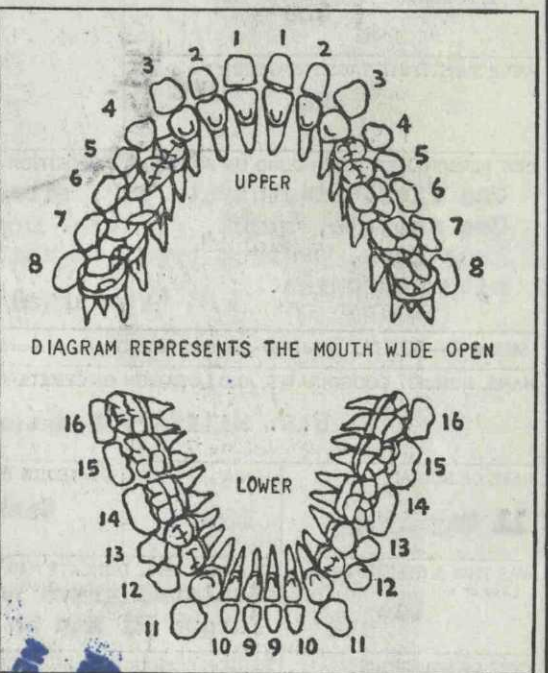


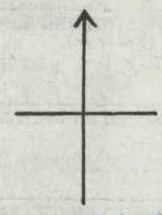
DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY

REMARKS:

**"Entire Remains Recovered"**

**RECORDS DIVISION**  
**APR 27 9 21 AM '46**



**RESTRICTED**



17 March 49

B/R dated April 9 45 in Drake, Nathan &  
K-3-56 Stamm <sup>and allied papers</sup> removed from this file  
per agreement Mrs Ross (MRS) and Mrs  
Mann (Ident) - Subject remains  
have been redesignated as X-43 Stamm

Stamm

1407 B.

File  
17 March 49  
Stamm  
NAT

177

Handwritten notes, possibly a list or summary, including the number '177' and some illegible text.

Handwritten signature or name, possibly 'William'.

Handwritten notes or scribbles in the bottom left corner.

CORRECTIONS AND ADDITIONS TO BURIAL REPORTS AS TAKEN FROM AG CAS CARD

CEMETERY ST AVOLD

PLOT AAAA ROW 2 GRAVE 21

NAME : DRAKE NATHAN F

RANK : 1 LT

ASN : 0-382849

ORGANIZATION : 11 INF REGT

DATE OF DEATH : 8 Sep 44

PLACE OF DEATH : ---

CAUSE OF DEATH : ---

G.J. 25 July 46

(Signature)

8 MAY 1947

CORRECTIONS AND ADDITIONS TO BURIAL REPORTS AS TAKEN FROM AG CAS CARD  
Cemetery St Avold Plot AAAA Row S Grave 51

NAME	:	BRAKE NATHAN F
RANK	:	1 LT
ASN	:	0-383849
ORGANIZATION	:	<u>11 INF REGT</u>
DATE OF DEATH	:	<u>8 Sep 44</u>
PLACE OF DEATH	:	---
CAUSE OF DEATH	:	---

G.I. 25 July 46  
(Signature)

8

RESTRICTED

46

WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)REPORT OF INTERMENT  
(AR 30-1810 and AR 30-1815)DATE OF REPORT  
11 May 1946

Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.				
		NAME (Last, first, middle initial)		SERIAL No.		
		Drake, Nathan F		O-382849		
		GRADE	ORGANIZATION	BRANCH OF SERVICE		
1st Lt.		Unknown		Infantry		
RACE		RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY			
Unknown		Protestant				
PLACE OF DEATH		CAUSE OF DEATH		DATE OF DEATH		
Fort St. Blaise, Fey, Moselle France		Unknown		Est. Jan. 1945		
EMERGENCY ADDRESSEE (Name, relationship, and address)						
Mrs. W. M. Drake, Red. 4, Groven Rd. Vineland, N.J.						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)				
One						
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)						
Yes						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME						
One first lieutenants bar, silver. One officers collar insignia, Infantry. One whistle, black, plastic. One pocket knife, black wooden handles. Four keys, padlock type, on chain. One house key, iron. One penknife, two blades with corkscrew. "Forwarded to Effects Depot"						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY						
U.S. Military Cemetery (260584) St Avild France						
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
11 May 1946	1000	Casket	Temp. Wooden Cross	AAAA	2	21
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE					
Yes	Isolated grave near Fort St. Blaise, Fey, Moselle, France Europe Rd Map Sh No 57 1/200,000 (U-804494)					
	PLOT No.	ROW No.	GRAVE No.			
			Isolated Grave			
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
Protestant	O. A. Rus er, Capt. O-528621					
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)					
Yes	Yes, embossed plate					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)		RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
Unknown X-6161		Unk	Unk	Ground Forces	20	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)		RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
Mullen, William B.		Unk	38413787	Ground Forces	22	
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF ONE OFFICER VERIFYING REPORT			
Herbert F Shaw WD Civ. Third Field Command AGRC			RALPHW. SLEATOR Major Inf.			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.						

RESTRICTED

16-43997-1

33

4

**RESTRICTED**

46-A

LEFT LITTLE FINGER	<b>Section UNIDENTIFIED REMAINS.</b>																
	<p><b>INSTRUCTIONS:</b></p> <p>(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.</p> <p>(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.</p>																
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR													
				BIRTHMARKS, SCARS, OR TATTOOS													
LEFT MIDDLE FINGER	WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND													
	OTHER IDENTIFICATION CLUES																
LEFT INDEX FINGER	<table border="1"> <tr> <td>FILLINGS</td> <td> <p>SILVER FILLING GOLD FILLING</p> </td> <td rowspan="6"> <p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> </td> </tr> <tr> <td>CAVITIES</td> <td> <p>CAVITY DECAYED</p> </td> </tr> <tr> <td>MISSING TEETH</td> <td> <p>TOOTH MISSING</p> </td> </tr> <tr> <td>CROWNED TEETH</td> <td> <p>PORCELAIN CROWN GOLD CROWN</p> </td> </tr> <tr> <td>BRIDGE WORK</td> <td> <p>GOLD BRIDGE</p> </td> </tr> <tr> <td></td> <td></td> </tr> </table>				FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>	CAVITIES	<p>CAVITY DECAYED</p>	MISSING TEETH	<p>TOOTH MISSING</p>	CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	BRIDGE WORK	<p>GOLD BRIDGE</p>		
FILLINGS					<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>											
CAVITIES					<p>CAVITY DECAYED</p>												
MISSING TEETH					<p>TOOTH MISSING</p>												
CROWNED TEETH					<p>PORCELAIN CROWN GOLD CROWN</p>												
BRIDGE WORK					<p>GOLD BRIDGE</p>												
LEFT THUMB																	
RIGHT THUMB																	
RIGHT INDEX FINGER																	
RIGHT MIDDLE FINGER																	
RIGHT RING FINGER																	
RIGHT LITTLE FINGER	<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align: center;"> </div>																
	REMARKS:																
	<p>"Entire Remains Recovered"</p>																

**RESTRICTED**

**WAR DEPARTMENT**  
**THE ADJUTANT GENERAL'S OFFICE**  
 WASHINGTON 25, D. C.

**REPORT OF DEATH**

DATE 5 Oct 44jed-4627

213 FULL NAME  Drake, Nathan F.		ARMY SERIAL NUMBER  0382849		GRADE  1 Lt.	
HOME ADDRESS  Vineland, N. J.		ARM OR SERVICE  Infantry		DATE OF BIRTH  9 Aug 16	
PLACE OF DEATH  European Area		CAUSE OF DEATH  Killed in action.		DATE OF DEATH  8 Sep 44	
STATION OF DECEASED  European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE  1 Mar 42		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)  Mrs. Edith K. Drake, 1894 Pershing Ave, San Bernardino, Calif. (Wife)					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)  Mrs. Edith K. Drake, Same as above. (Wife)					
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT	
YES	NO	YES	NO	YES	NO
				WAS DECEASED ON DUTY STATUS	
				YES	NO
				AUTHORIZED ABSENCE	
				YES	NO
				IN FLYING PAY STATUS	
				YES	NO
				OTHER PAY STATUS (SPECIFY BELOW)	
				*X	

ADDITIONAL DATA AND/OR STATEMENT

\*Combat Infantryman.

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
2. O. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE  
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

*James W. Reinhardt*  
 ADJUTANT GENERAL

10 OCT 1944 FILE

WAR DEPARTMENT  
GENERAL INVESTIGATIVE OFFICE  
WASHINGTON, D. C.

REPORT OF DEATH

NAME OF DECEASED	REGIMENT	COMPANY	GRADE	DATE OF DEATH	PLACE OF DEATH
DATE OF BIRTH	PLACE OF BIRTH	STATUS	CAUSE OF DEATH	PLACE OF BURIAL	DATE OF BURIAL

NAME OF NEXT OF KIN (If none, state so)

NAME OF WIFE (If none, state so)

REGIMENT	COMPANY	GRADE	MARRIED		MILITARY SERVICE		MILITARY SERVICE		OTHER SERVICE
			YES	NO	YES	NO	YES	NO	

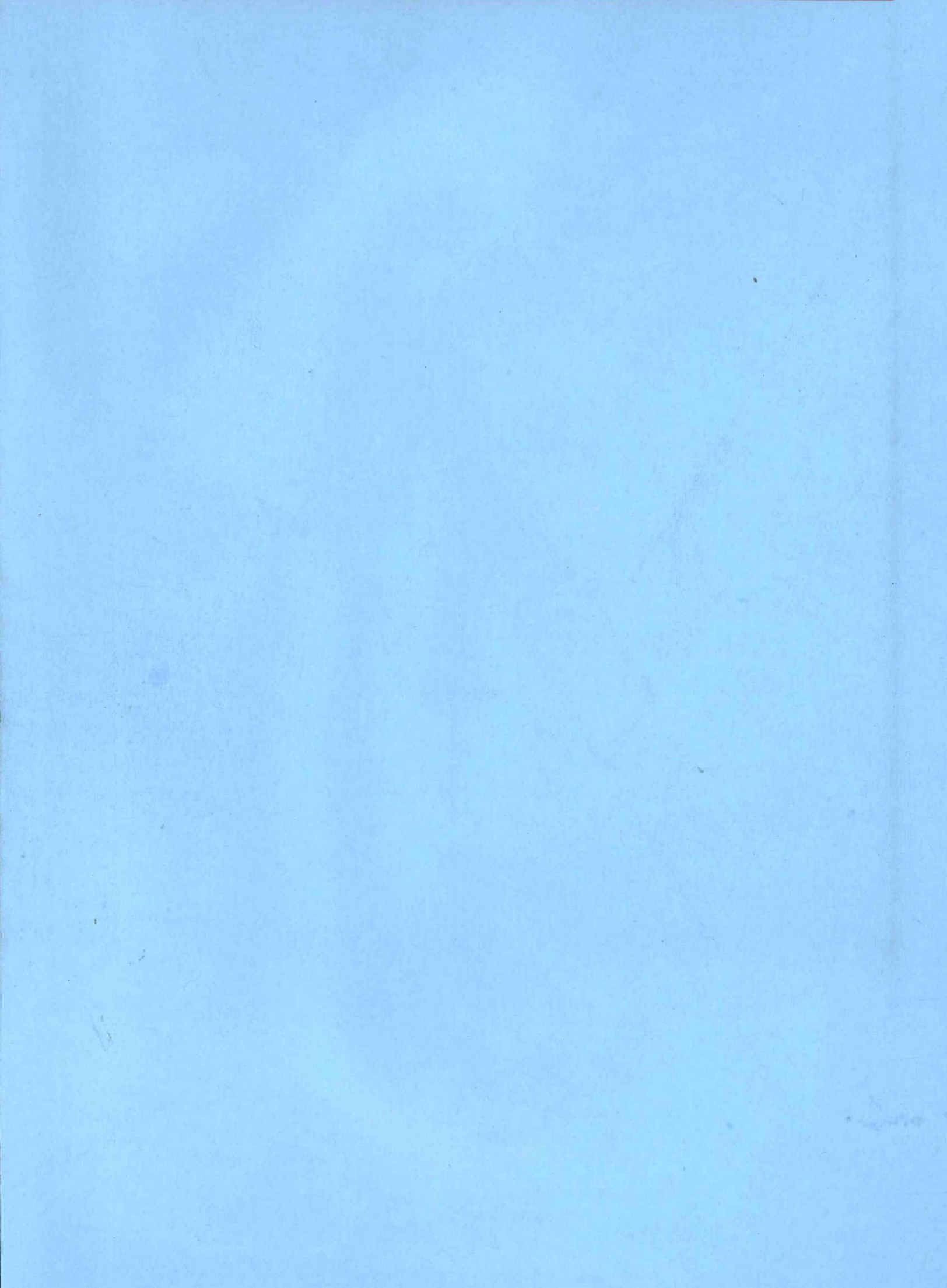
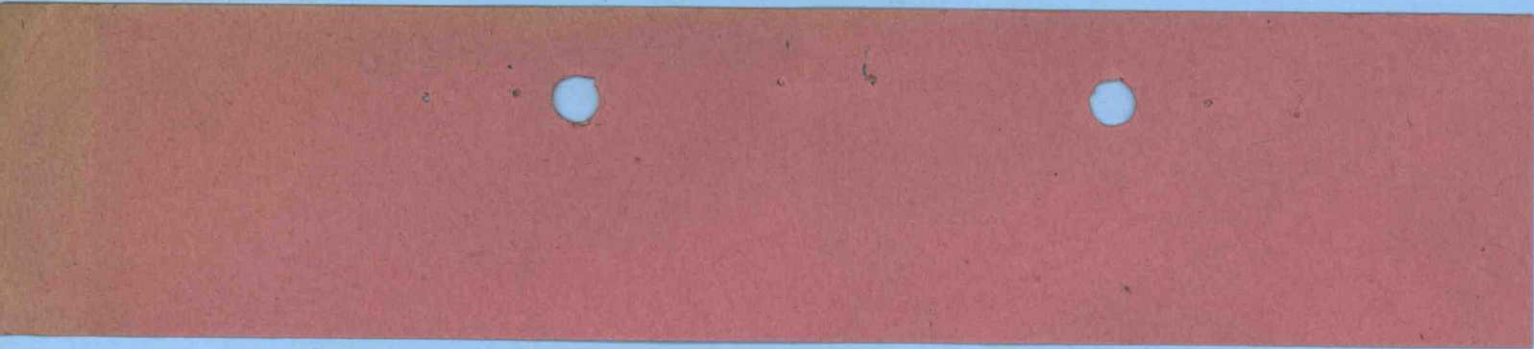
REMARKS

...

REPORTED BY	DATE	OFFICE



*[Handwritten signature]*



**WAR DEPARTMENT**  
**THE ADJUTANT GENERAL'S OFFICE**  
 WASHINGTON 25, D. C.

252979

**REPORT OF DEATH**DATE 5 Oct 44

jed 4627

FULL NAME <b>Drake, Nathan F.</b>		ARMY SERIAL NUMBER <b>0382849</b>	GRADE <b>1 Lt.</b>
HOME ADDRESS <b>Vineland, N. J.</b>		ARM OR SERVICE <b>Infantry</b>	DATE OF BIRTH <b>9 Aug 16</b>
PLACE OF DEATH <b>European Area</b>	CAUSE OF DEATH <b>Killed in action.</b>		DATE OF DEATH <b>8 Sep 44</b>
STATION OF DECEASED <b>European Area</b>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <b>1 Mar 42</b>	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <b>Mrs. Edith K. Drake, 1894 Pershing Ave, San Bernardino, Calif. (Wife)</b>			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <b>Mrs. Edith K. Drake, Same as above. (Wife)</b>			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS
YES	NO	YES	NO
OTHER PAY STATUS (SPECIFY BELOW)			
*X			



## ADDITIONAL DATA AND/OR STATEMENT

\*Combat Infantryman.

## COPIES FURNISHED:

S. G. O.	F. B. I.	F. O., U. S. A.
2. O. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE  
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

*James W. Reinhart*

ADJUTANT GENERAL

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON, D. C.

REPORT OF SERVICE

525213

NAME (Last, First, Middle Initial)		GRADE		COMPONENT		BRANCH		DATE OF SERVICE	
[Faint Name]		[Faint Grade]		[Faint Component]		[Faint Branch]		[Faint Date]	
DATE OF BIRTH		PLACE OF BIRTH		EDUCATION		MILITARY EXPERIENCE		REMARKS	
[Faint Date]		[Faint Place]		[Faint Education]		[Faint Experience]		[Faint Remarks]	

[Large empty area for detailed report content]

[Faint signature and stamp area at the bottom]

AMOUNT OF CHECK	NOTE DISCREPANCY IN	INCLOSE VALUABLES	RECIPIENT FROM
	NAME	SHIP VALUABLES	CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK		FORM 20
<p>Mrs. N. F. Drake 1894 Pershing Avenue San Bernardino, California</p> <p>1/Lt. Nathan F. Drake</p> <p>O-382849</p> <p>252979</p>			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED <i>Bad boy</i>
REMOVE BL'DSTAINED			
REMOVE DAMAGED			
FILMS REMOVED			
DIARY REMOVED			
CLR/WC/ <i>amd</i>	SUMMARY COURT DATA		DATE ACTION TAKEN
DATE OF FINDING	APPLICANT		<i>10-17</i>
REMARKS			MAIL REVIEWER (initials)
			<i>W.S.</i>
			SHIPPED
			FRANKED
			EXPRESS
			FREIGHT
			DATE SHIPPED
			<b>OCT 17 1946</b>
			SHIPPING CLERK
			<i>JNK</i>
ROUTING			
ACCOUNTING BRANCH			
WAREHOUSE			
FILE			
ORDER FOR ACTION			

<p>NO. OF PAGES</p> <p>DATE OF PUBLISHING</p> <p>NAME OF PUBLISHER</p> <p>ADDRESS OF PUBLISHER</p> <p>CITY OF PUBLISHER</p> <p>STATE OF PUBLISHER</p> <p>COUNTRY OF PUBLISHER</p> <p>ISSUE</p> <p>VOLUME</p> <p>PAGES</p> <p>PRICE</p> <p>DATE OF RECEIPT</p> <p>BY</p>	<p>NAME OF AUTHOR</p> <p>ADDRESS OF AUTHOR</p> <p>CITY OF AUTHOR</p> <p>STATE OF AUTHOR</p> <p>COUNTRY OF AUTHOR</p> <p>NAME OF EDITOR</p> <p>ADDRESS OF EDITOR</p> <p>CITY OF EDITOR</p> <p>STATE OF EDITOR</p> <p>COUNTRY OF EDITOR</p> <p>NAME OF DISTRIBUTOR</p> <p>ADDRESS OF DISTRIBUTOR</p> <p>CITY OF DISTRIBUTOR</p> <p>STATE OF DISTRIBUTOR</p> <p>COUNTRY OF DISTRIBUTOR</p>	<p>DATE OF RECEIPT</p> <p>BY</p> <p>NAME OF AGENT</p> <p>ADDRESS OF AGENT</p> <p>CITY OF AGENT</p> <p>STATE OF AGENT</p> <p>COUNTRY OF AGENT</p>
---	---	--

ORDER FOR ACTION

SEE ON PAGE 14  
4421 728 21

2520979

ATTACHMENTS		<b>EFFECTS INVENTORY</b> <b>ARMY EFFECTS BUREAU</b>	STATUS	
<input checked="" type="checkbox"/>	INBOUND INVENTORY		DECEASED	
<input checked="" type="checkbox"/>	G. R. OR SUB GR LABEL		MISSING	
<input checked="" type="checkbox"/>	WILL OR POWER OF ATTY.		P. O. W.	
<input checked="" type="checkbox"/>	TALLY IN FORM 43		ABANDONED	
		UNKNOWN		

BAGS, CLOTH OR TRAVEL	BELT	OVERCOATS	
BELT, MONEY (NO MONEY)	BOOKS, ADDRESS	PAPERS, PERSONAL	1
BILLFOLD (NO MONEY)	BOOKS, PILOT LOG	PENCIL, MECHANICAL	
BOOKS	BRUSHES	PEN, FOUNTAIN	1
BRACELET, IDENT.	CASE	PHOTOS	
CAMERAS	CLOTH. WASH	PIPES	
CLOTHING	COATS	RINGS	
MISC. ARTICLES	FOOTLOCKER	SCARFS	
RELIGIOUS ARTICLES	FOOTWEAR, PR.	SHIRTS	
RIBBONS, DECORATION	GLASSES	SOCKS, PR.	
SHORT SNORTER	GLOVES, PR.	STATIONERY	
SOUVENIR MONEY	HANDKERCHIEFS	TIES	
SOUVENIRS	HEADWEAR	TOBACCO	
TESTAMENTS	JACKETS	TOILET ARTICLES	
TOWELS & WASHCLOTHS	KITS	TOWELS	
U. S. MONEY (AMOUNT)	KNIVES	TROUSERS, PR.	
WATCH	LETTERS	TRUNKS, PR.	
WINGS	LIGHTERS	UNDERWEAR	

*cross rifle*  
*Insignias*  
*Lt. Bar*

CONTAINERS ADDRESSED TO	INFORMATION
<i>none</i>	<i>none</i> <i>Recheck</i>
NAME AND STATUS VARIATIONS	CROSS REFERENCE

DAMAGED

CHECK	REC'D BY	NUMBER	BUREAU CHECK
MONEY ORDER	<i>free</i> <i>ca</i>	SYMBOL	TRANSMIT ORIGINAL
BOND		AMOUNT	ORIG. REG. MAIL
TRAV. CHECK		DATE	TO G. A. O.
FOREIGN CURRENCY		BANK OR PLACE OF ISSUE	MUTILATED
U. S. CURRENCY		PAYEE	TO ISSUING AGENCY
		REMITTER OR DRAWER	

TALLY NO. <i>5280</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>24 Sept 46</i>	BOX NO.	SHEET _____ OF _____ SHEETS
NAME <i>NATHAN F. DRAKE</i>		A. S. N. <i>0-382849</i>		
ORGANIZATION		RANK <i>Lt.</i>	CASE NO.	
WAREHOUSE SPACE <i>1099</i>	EXAMINED BY <i>Bower</i>	DIARY REMOVED		
PACKAGE DESCRIPTION <i>1 pkg</i>	PACKED BY <i>Cornach</i>	PHOTO FILM REMOVED		
	WEIGHT	INSPECTED BY <i>[Signature]</i>	MOTION PICTURE FILM REMOVED	
	STORED BY <i>[Signature]</i>	SHIPPED		BY WHOM <i>[Signature]</i>
		DATE <i>OCT 17 1946</i>		

ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

Bad odor  
Keys rusty + corroded  
1- Knife badly rust stained  
1- Knife rust stained corroded  
+ Part missing - Lt Bias  
Slightly tarnished, 1 cup  
Rifle insignia tarnished

SHORTAGES

1 - Key

part missing  
Whistle grease stained  
+ tarnished

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above items were not in the containers inventoried by me.

Bower  
INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

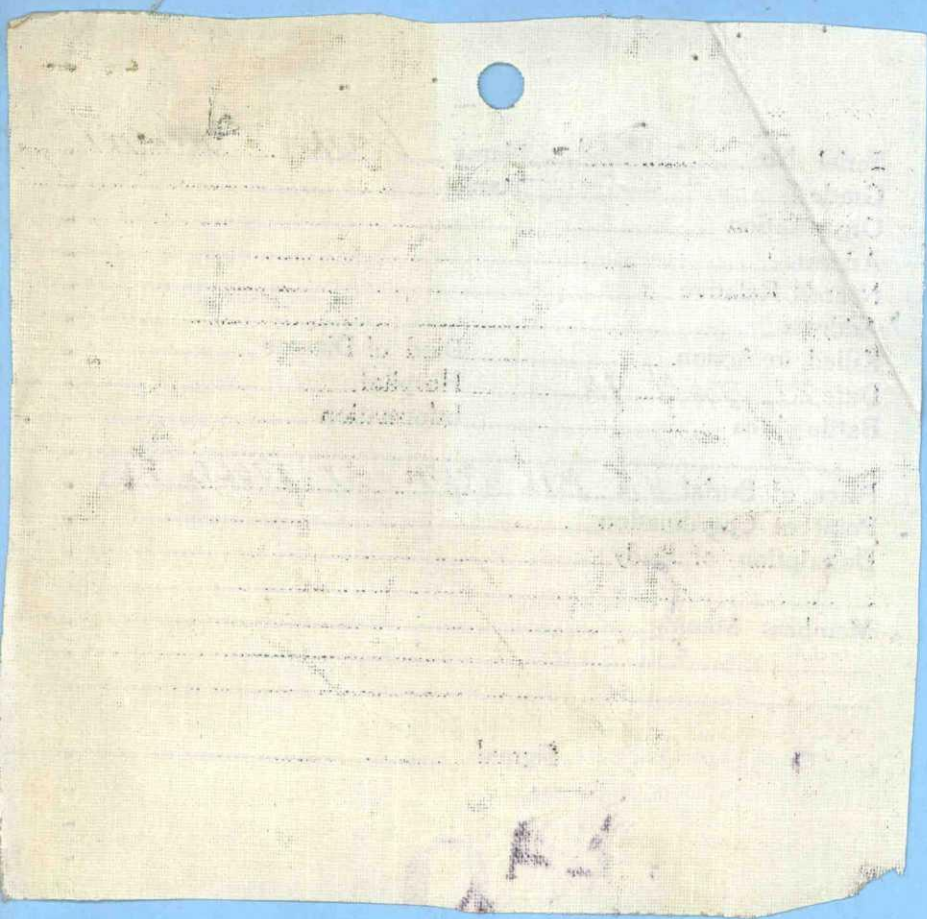
ARMY EFFECTS BUREAU  
EFFECTS INVENTORY



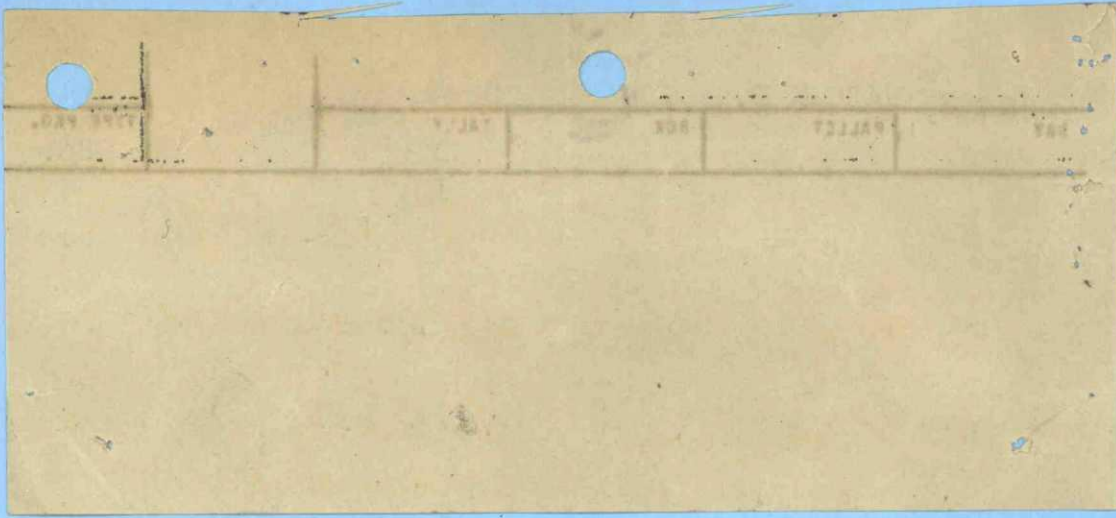
Serial No. O-382849 Name Drake, Nathan F  
 Grade 1st Lt Rank \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 Nearest Relative \_\_\_\_\_  
 Address \_\_\_\_\_  
 Killed in Action \_\_\_\_\_ Died of Disease \_\_\_\_\_  
 Date 21 JAN 45 Hospital \_\_\_\_\_  
 Battle Area \_\_\_\_\_ Information \_\_\_\_\_  
 Place of Burial U.S. MIL CEM ST AVOLD FR.  
 Point of Coordination \_\_\_\_\_  
 Description of Body \_\_\_\_\_  
 Members Missing \_\_\_\_\_

Signed \_\_\_\_\_

440



DRAKE, NATHAN F.		LT	2849	
BAY	PALLET	BOX	TALLY 5280	TYPE PKG. GRB.



RESTRICTED

INVENTORY FORM

Date 8 May 1946

SUBJECT: Inventory of Personal Effects of:

(Last name) (First name) (M.I.) (Rate) (ASN) 04882849  
TO: Effects Quartermaster, Communications Zone, APO US Army

The above named individual of (Unit) (Organization)

was reported about 194  
Status (Kia, mia, hosp., etc.) (Date)

Designated Beneficiary if information readily accessible

INVENTORY OF EFFECTS

- One first lieutenants bar, silver. One officers collar insignia, Infantry.
- One whistle, black, plastic. One pocket knife, black wooden handles.
- Four keys, padlock type, on chain. One house key, iron.
- One penknife, two blades with corkscrew.

Money in the amount of \_\_\_\_\_ has been turned into \_\_\_\_\_  
Form WDFD 38 enclosed.

(Name of Finance Office and Symbol Number)

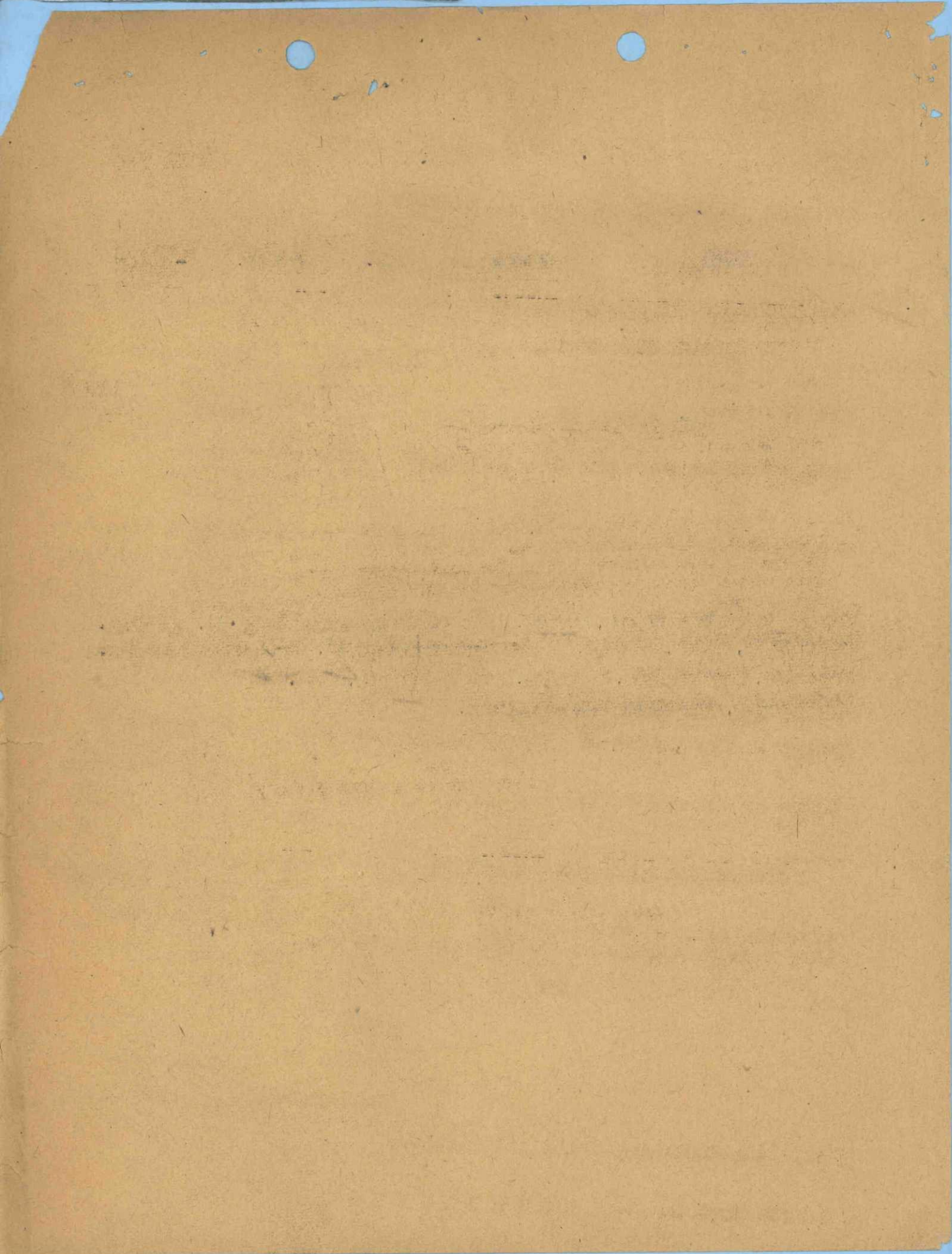
Names and addresses of any Banks in which accounts may be carried

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by (rail, truck, etc.)

on 194

NAME Leon Postuch  
Rank & ASN 2nd Lt 01337752  
Organization 306092B

Any additional pertinent information:



252979

CLR/WC/qs  
17 October 1946

*wh*  
*10-17*

Mrs. N. F. Drake  
1894 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

Thank you for the information recently given  
the Army Effects Bureau in connection with the disposal  
of personal property of your husband, First Lieutenant  
Nathan F. Drake.

4

This property, contained in one package, is  
being sent you for distribution. If, for some reason,  
it has not been received within the next thirty days,  
this Bureau should be informed so that tracer may be  
instituted.

65

Yours very truly,

C. L. RUMFIELD  
1st Lt, QMC  
Asst Effects Quartermaster

17 October 1945  
GIL W/02

252378

Mrs. H. T. Drake  
1894 Lansing Avenue  
San Bernardino, California

Dear Mrs. Drake:

Thank you for the information recently given  
the Army Bureau in connection with the disposal  
of personal property of your husband, First Lieutenant  
Richard T. Drake.

This property, contained in one package, is  
being sent you for distribution. It, for some reason,  
has not been received within the next thirty days.  
The Bureau should be informed so that proper may be  
instituted.

Yours very truly,

G. L. BISHOP  
1st Lt., USA  
Army Bureau of Investigation

4

88



4

1894 Pershing Ave.  
San Bernardino, Calif.  
 October 7, 1946

Lt. C. L. Rumpf, Q M. C.  
 Asst Effects Quartermaster  
 601 Hardesty Avenue  
 Kansas City 1, Missouri

10/15/46  
 WU

Dear Sir:

Re: 252979

Thank you for your very kind letter of October 3<sup>rd</sup> in regard to the personal effects of my husband Lt. Nathan F. Drake.

I would like all the things sent to me regardless of odor.

Again, thank you for your consideration in this matter.

Sincerely,

Edith K. Drake  
 (Mrs. N. F. Drake)

file  
 fco

1914  
for [unclear]  
October 7, 1914

11/15/14  
[unclear]

W.C. [unclear] D.M.C.  
[unclear]  
[unclear]  
Kansas City, Missouri

Dear Sir,  
I would like all the things  
sent to me [unclear] of order  
[unclear] [unclear] for you  
[unclear] [unclear] in the [unclear]

RECEIVED  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE  
KANSAS CITY, MO.  
OCT 10 1914

[unclear]  
[unclear]  
[unclear]

252979

S-23 Oct 46  
GLR/WB/rb  
3 October 46

Mrs. Edith K. Drake  
1894 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

The Army Effects Bureau has received additional personal property belonging to your husband, First Lieutenant Nathan F. Drake.

Not infrequently, due to exposure to the weather and other natural conditions, certain articles received here have a peculiar or sometimes even disagreeable odor. Such an odor may develop from the length of time the articles have been packaged in transit from overseas. All the effects of your husband received here, are in this condition. Since it is our desire to spare the recipient any avoidable unpleasant reaction, I wish to acquaint you with this condition and ask that you tell me whether you, nevertheless, desire these articles sent you.

For your convenience in replying, there is inclosed an addressed envelope which needs no postage.

Yours very truly,

1 Incl--  
Envelope

C. L. RUMFIELD  
1st Lt, QMC  
Asst. Effects Quartermaster

XXXXXXXXXXXX

2-28 Oct 48  
G.M./W/ps  
3 October 48

28222

Mrs. Keith E. Drake  
1894 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

The Army Effects Bureau has received additional personal property belonging to your husband, First Lieutenant Nathan W. Drake.

Not infrequently, due to exposure to the weather and other natural conditions, certain articles received here have a peculiar or sometimes even disagreeable odor. Such an odor may develop from the length of time the articles have been packaged in transit from overseas. All the effects of your husband received here, are in this condition. Since it is our desire to give the recipient any available unpleasant reaction, I wish to apprise you with this condition and ask that you tell me whether you nevertheless desire these articles sent you.

For your convenience in replying, there is enclosed an addressed envelope which needs no postage.

Yours very truly,

G. A. MARSHALL  
1st Lt., USA  
Asst. Effects Quartermaster

I Enclose  
Envelope

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Edith K. Drake  
1894 Pershing Avenue  
San Bernardino, California

SHIP TO:  
1st Lt. Nathan F. Drake

Effects of: 0-382849  
Name  
ASN 252979 D

Case No.

Wt.

DATE 6 July 1945  
GHG:WA:gc

*Smith*  
FOR: Effects Quartermaster

REMARKS:

         Inclose Bureau Check  
         Acct. No.           
         Amount           
         Inclose "Valuables" item  
         Ship "Valuables" item(s)

         Remove G.I.  
         Note discrepancy in           
         Films removed  
         Diary removed  
         Laundry removed

ROUTING:

         Accounting Branch  
 1 Warehouse Division  
 2 Files Branch, Adm. Div.

*1ctu } inv 5-21-45*  
*1ctu }*

REMARKS:

Fracked           
Est. Exp. Chgs.           
Est. Frt. Chgs.           
No. of packages  2

*ME*  
Shipping Clerk

JUL 17 1945





D 5848E

D 5848E

W 488E

Grid containing faint mirrored text and bleed-through from the reverse side of the page.



252,979

DESCRIPTION	ARMY EFFECTS BUREAU INVENTORY	DECEASED <input checked="" type="checkbox"/>
		MISSING <input checked="" type="checkbox"/>
		P.O.W. <input checked="" type="checkbox"/>
		ABANDONED <input checked="" type="checkbox"/>
		TALLY NO. 7722
		INV. DATE 21-MAY-45
		ORIG. NO. OF PKGS. 1
		BOX NO.
		SHEET 1 OF 1 SHEETS
		ORGANIZATION 11th Infantry Co. 3.

NAME **NATHAN F. DRAKE**  
 A.S.N. **0382849** RANK **1st LT.**

BELT		TOWELS & WASHCLOTHS		WINGS
BELT, MONEY (NO MONEY)	X	CLOTHING		BAGS, CLOTH OR TRAVEL
CLOTH; WASH		BRACELET IDENT.		BILLFOLD, (NO MONEY)
COATS		BRUSHES		CASE
FOOTWEAR, PR.		CAMERAS		FOOTLOCKER
GLOVES, PR.		GLASSES		KIT, SEW, TLT, OR WRITING
HANDKERCHIEFS		KNIVES		BOOKS
HEADWEAR		LIGHTERS	X	BOOKS, ADDRESS
JACKETS	X	MISC. INSIGNIA		BOOKS, PILOT LOG
OVERCOATS		PEN, FOUNTAIN		DIARY (REMOVED FOR DUR)
SCARFS		PENCIL, MECHANICAL		FILMS
SHIRTS		PIPES		LETTERS
SOCKS, PR.		RELIGIOUS ARTICLES		PAPERS, PERSONAL
TIES	X	RIBBONS, DECORATION		PHOTOS
TOWELS		RINGS		SHOE SHINE ARTICLES
TROUSERS, PR.		TOBACCO		SHORT SNORTER
TRUNKS, PR.		TOILET ARTICLES		SOUVENIRS
UNDERWEAR		WATCH	X	SOUVENIR MONEY
				STATIONERY
				TESTIMENTS
				U.S. MONEY MOUNT

REMARKS *Wife Mrs. Edith R. Drake 1894 Pershing Ave San Bernardino, Calif*

ATTACHMENTS *Inventory of Effects*

C.A.T. <i>none</i>	WEIGHT	G.I. REMOVED
WAREHOUSE SPACE <i>156 X</i>	STORAGE BY <i>Mc</i>	SHORTAGE ON REVERSE
INVENTORIED BY <i>Newberry-Fedeli</i>	DATE SHIPPED <i>JUL 17 1945</i>	IDENT. TAGS REMOVED
PACKED BY <i>F. Hendricks</i>	CHECKED BY <i>BW</i>	DIARY REMOVED
		LOCKED STORAGE
		LAUNDRY REMOVED
		FILM REMOVED

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SKRT

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above listed items were not in the containers inventoried by me:

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

NAME DRAKE, NATHAN F. LT. 2849

BAY	PALLET	BOX	TALLY
11	71		7722

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
D.BAG		

1955

DATE	NAME	ADDRESS	CITY	STATE

U.S. GOVERNMENT PRINTING OFFICE: 1955

**RESTRICTED**  
**INVENTORY FORM**

31 December 1944

SUBJECT: Inventory of Personal Effects of:

(Date)

DRAKE

NATHAN

F.

1st Lt

0382849

(Last Name)

(First Name)

(MI)

(Rank)

(ASN)

TO: Effects Quartermaster, Communications Zone, APO

US Army

The above named individual of

11th Infantry

Company, 4th

(Unit)

(Organization)

as reported

KIA

about

8 September

1944.

(Status, KIA, MIA, HOSP ETC)

(Date)

Designated Beneficiary if information readily accessible

Mrs Edith K. Drake, (wife) 1894 Pershing Ave, San Bernardino, California

**INVENTORY OF EFFECTS**

- 1 Blouse w/insignias ✓
- 1 pr Leather gloves ✓
- 1 pr Trousers, pinks ✓
- 1 pr Pajamas ✓
- 1 pr Oxfords ✓
- 1 pr swimming trunks ✓
- 3 Tan Shirts ✓
- 2 Field caps ✓
- 1 pr glasses w/case ✓
- 1 Undershirt ✓
- 1 Shift, OD ✓
- 1 Book (Officer's Guide) ✓
- 1 pr socks ✓
- 1 Handkerchief ✓
- 1 Chess game ✓
- 2 Captains bars ✓
- 1 cross rifle insignia ✓
- 1 souvenir coin ✓
- 1 Ribbon, ETO ✓

Money in the amount of None has been turned into

(Name of finance office and

symbol number)

Form WDFD 38 enclosed.

Names and addresses of any Banks in which accounts may be carried:

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they will be forwarded to the Effects Dept

by J. P. [Signature] on Jan 2 1945.

(Rail, Truck, etc.)

Andrew J. Heika  
Name

1st Lt, 0411259  
Rank & ASN

11th Infantry.  
Organization

any additional pertinent information:

14 December 1944

INVENTORY OF EFFECTS

SUBJECT: Inventory of Personal Effects of:

(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Commissions Zone APO  
The above named individual of

(Unit) (Organization) (Date) 1944

as reported (Status, KIA, MIA, HOSP, etc.)  
Designated Beneficiary if informant readily accessible  
Mrs. Edith R. Drake, (wife) 1844 Pershing Ave, San Bernardino, California

INVENTORY OF EFFECTS

I possess and have in my possession the following items:  
1. [illegible]  
2. [illegible]  
3. [illegible]  
4. [illegible]  
5. [illegible]  
6. [illegible]  
7. [illegible]  
8. [illegible]  
9. [illegible]  
10. [illegible]  
11. [illegible]  
12. [illegible]  
13. [illegible]  
14. [illegible]  
15. [illegible]  
16. [illegible]  
17. [illegible]  
18. [illegible]  
19. [illegible]  
20. [illegible]

Money in the amount of \_\_\_\_\_ has been turned into  
(Name of finance office and symbol/number) \_\_\_\_\_  
Form WDFD 38 enclosed.

names and addresses of any banks in which accounts may be carried:  
I certify that the above items constitute all of the effects secured by me, or  
the above named individual and that they will be forwarded to the Effects Dept

by \_\_\_\_\_ (Rail, Truck, etc.)  
Name \_\_\_\_\_  
Rank & ASN \_\_\_\_\_  
Organization \_\_\_\_\_  
1st Infantry

Any additional pertinent information:

252,979

GHG:WA:wp  
July 9, 1945

Mrs. Edith K. Drake  
1894 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

The Army Effects Bureau has received some additional property of your husband, First Lieutenant Nathan F. Drake.

These effects, contained in two cartons, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that tracer action may be instituted.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of the officer's legal residence.

Extending every sympathy, I am

Sincerely yours,

P. L. KOOB  
1st Lt. Q.M.C.  
Officer-in-Charge  
SJ Unit

83

ENG:NA:WP  
July 8, 1948

255,978

Mrs. Edith K. Drake  
1884 Pershing Avenue  
San Bernardino, California

Dear Mrs. Drake:

The Army Signal Corps has received some additional property of your husband, First Lieutenant Nathan P. Drake.

These effects, contained in two cartons, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that proper action may be instituted.

As previously indicated, personal property is transmitted by the Bureau for distribution according to the laws of the state of the officer's legal residence.

Extending every sympathy, I am

Sincerely yours,

P. L. ROOB  
1st Lt. G.M.C.  
Officer-in-Charge  
81 Unit

20



Summary Court-Martial  
ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT  
601 Hardesty Avenue  
Kansas City 1, Missouri

JFM:WA:vm

Case No. 252979Date 28 March 1945

SUBJECT: Report of transactions in disposing of the effects of

Nathan F. Drake

(Name of decedent)

0-382849

(Army Serial Number)

late a

First Lieutenant

(Grade)

Infantry

(Organization, Army or Service)

who died

on the 8 day of September, 1944, at European Area.

TO : The Adjutant General, War Department, Washington 25, D. C.

1. Complying with A.W. 112, a Summary Court Martial, convened at Kansas City, Mo, pursuant to S.O., 228, Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

a. No legal representative or widow of decedent being present at decedents camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. \_\_\_\_\_.)

c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt \_\_\_\_\_, Incl. \_\_\_\_\_)

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below)

## FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 14 March 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of \_\_\_\_\_

Mrs. Edith K. Drake for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112, Mrs. Edith K. Drake of \_\_\_\_\_ (Name of person found entitled) 1894 Pershing Avenue, San Bernardino State of \_\_\_\_\_ (Number, Street or Avenue) (City, Town or Village) California, is the Widow of the \_\_\_\_\_ (Relationship or Capacity)

above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, Q.M.C.

(Name, Rank, Organization)

SUMMARY COURT MARTIAL

Summary Court-Martial  
ARMY SERVICE RECORDS  
KANSAS CITY, MISSOURI  
601 West 12th Avenue  
Kansas City, Missouri

SUBJECT: Report of transactions in disposing of the effects of

Name of decedent (Army Serial Number) \_\_\_\_\_  
Last name \_\_\_\_\_  
First name \_\_\_\_\_  
Organization, Army or Service \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, at \_\_\_\_\_  
The Adjutant General, War Department, Washington 25, D.C.

1. Company with A.W. 112, a Summary Court-Martial, convened at Kansas City, Missouri, pursuant to G.O. 328, H.Q. 10th Army, dated 22 September 1943, for the purpose of disposing of the effects of the above-named soldier, as person entitled to military law, reports that:

- a. The legal representative or widow of the above-named soldier, \_\_\_\_\_, documents camp or quarters, effects of decedent were forwarded to Summary Court-Martial.
- b. \_\_\_\_\_ of which the sum of \_\_\_\_\_ was collected. (If nothing was found on collection, state "none".) Otherwise attach a brief statement of same with date and dollar amount.
- c. Decedent was indebted to \_\_\_\_\_ which was repaid by the Summary Court-Martial from funds of decedent. (See enclosed receipt.)
- d. Disposition of decedent's effects (if any) will be reported, if any, has been made by the Summary Court-Martial by \_\_\_\_\_, \_\_\_\_\_, at no personal expense to person found entitled to summary court-martial (see findings below).

FINDINGS

Before a Summary Court-Martial which convened at Kansas City, Missouri, on \_\_\_\_\_, pursuant to Special Order 234, Headquarters, 10th Army, dated 22 September 1943, the application of Article 15 of the Army Regulations for the effect of the above-named soldier, \_\_\_\_\_, or person entitled to military law, now in the possession of the United States, with other relevant evidence, was duly considered and, whereupon, this Summary Court-Martial finds that, under the provisions of \_\_\_\_\_ (name of person found entitled) \_\_\_\_\_ State of \_\_\_\_\_ (number, street or avenue) \_\_\_\_\_ is the \_\_\_\_\_ (relationship or capacity) of the above-named decedent and reports to be entitled to receive his or her effects.

(Signature of Summary Court Officer) \_\_\_\_\_  
 (Name, Rank, Organization) \_\_\_\_\_  
 SUMMARY COURT OFFICER

SAV



ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

#252,979  
IN REPLY REFER TO

JRM:HA:mam  
March 20, 1945

*fc*

Dear Mrs. Drake:

The Army Effects Bureau has received from overseas some personal effects of your husband, First Lieutenant Nathan F. Drake.

These effects are being forwarded to you in one footlocker.

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the officer's legal residence.

I regret the circumstances prompting this letter, and wish to express my sympathy in the loss of your husband.

Yours very truly,

HARRY NIEMIEC  
2nd Lt. Q.M.C.  
Chief, Correspondence Branch



ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPT  
601 HARDESTY AVENUE  
KANSAS CITY 11, MISSOURI

March 20, 1945

1525 279  
IN REPLY REFER TO

Dear Mrs. Drake:

The Army Effects Bureau has received from overseas some personal effects of your husband, First Lieutenant Nathan F. Drake.

These effects are being forwarded to you in one footlocker.

If, by any chance, the property has not reached you as the expiration of thirty days from this date, please notify us and tracer will be instituted.

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I regret the circumstances prompting this letter, and wish to express my sympathy in the loss of your husband.

Yours very truly,

HARRY NIMMICO  
2nd Lt., G.M.C.  
Chief, Correspondence Branch

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Edith K. Drake  
1894 Pershing Avenue  
San Bernardino, California

Eff. To: Nathan F. Drake  
Name  
0-382849  
ASN  
252,979 D  
Case No.  
Wt.

JRM:SP:sac  
DATE 15 March 1945

*Hessie McMillan*  
FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check  
    Acct. No. \_\_\_\_\_  
    Amount \_\_\_\_\_  
 Inclose "Valuables" item  
 Ship "Valuables" item(s)

Remove G.I.  
 Note discrepancy in \_\_\_\_\_  
 Films removed  
 Diary removed  
 Laundry removed

ROUTING:

- Accounting Branch
- 1. Warehouse Division
- 2. Files Branch, Adm. Div.

*17007 locker 75<sup>th</sup>*

REMARKS:

Franked **MAR 20 1945**  
Est. Exp. Chgs. \_\_\_\_\_  
Est. Frt. Chgs. \_\_\_\_\_  
No. of packages 7

**MAR 28 1945**



*HML*  
Shipping Clerk



SHEET <u>1</u> OF <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED
BOX NUMBER	ORIGINAL NUMBER OF PACKAGES		MISSING
TALLY NUMBER <u>6711</u>	INVENTORY DATE <u>24 Feb 45</u>	CASE NUMBER <u>252,979</u>	P.O.W.
EFFECTS OF <u>Nathan J. Drake</u>	RANK <u>2nd Lt</u>		ABANDONED
A.S.N. <u>0-382849</u>	ORGANIZATION <u>Inf 38th Div.</u>		
PACKAGE DESCRIPTION <u>#1 ft locker</u>			

CLOTHING		PERSONAL ITEMS		CONTAINERS	
<u>1</u>	BELT		BRACELET, IDENTIFICATION	<u>1</u>	BAGS, CLOTH
	BELT, MONEY (NO MONEY)		BRUSHES	<u>1</u>	BAGS, TRAVEL
	CLOTH, WASH		CAMERAS	<u>1</u>	BILLFOLD (NO MONEY)
	COATS	<u>1</u>	GLASSES	<u>1</u>	CASE, <u>Brief</u>
<u>3</u>	FOOTWEAR, PR.		KNIVES	<u>1</u>	FOOTLOCKER
	GLOVES, PR.		LIGHTERS		KIT, SEWING
	HANDKERCHIEFS		MISC. INSIGNIA		KIT, TOILET
<u>1</u>	HEADWEAR		MISC. ITEMS		KIT, WRITING
<u>1</u>	JACKETS		PEN, FOUNTAIN		PAPERS AND MISC.
	OVERCOATS		PENCIL, MECHANICAL	<u>X</u>	BOOKS
	SCARFS		PIPES	<u>X</u>	BOOKS, ADDRESS
	SHIRTS		RELIGIOUS ARTICLES		BOOKS, NOTE
<u>X</u>	SOCKS, PR.		RIBBONS, DECORATION		BOOKS, PILOT LOG
<u>X</u>	TIES		RINGS		DIARY (REMOVED FOR DURATION)
	TOWELS		TOBACCO		FILMS
<u>3</u>	TROUSERS, PR.	<u>X</u>	TOILET ARTICLES		LETTERS
	TRUNKS, PR.		WATCH	<u>X</u>	PAPERS, PERSONAL
	UNDERWEAR		WINGS	<u>X</u>	PHOTOS
					SHOE SHINE ARTICLES
					SHORT SNORTER
					SOUVENIRS
					SOUVENIR MONEY
					STATIONERY
					TESTAMENTS
				<u>.01</u>	U.S. MONEY (AMOUNT)

1 pr Coveralls  
2 sheets, 1 pillow case  
1 flash light

REMARKS: no information  
 ATTACHMENTS: FORM #54 FORM #100  
inventory + Certificate

C.A.T.	WEIGHT	GI REMOVED
WAREHOUSE SPACE <u>1709X</u>	<u>75#</u>	SHORTAGE ON REVERSE
INVENTORIED BY <u>E. Hare</u>	DATE SHIPPED <u>MAR 20 1945</u>	IDENT. TAGS REMOVED
PACKED BY <u>Huffman</u>	CHECKED BY <u>E</u>	DIARY REMOVED
	#43 OR ADDITIONAL	LOCKED STORAGE
		LAUNDRY REMOVED
		FILM REMOVED

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above listed items were not in the containers inventoried by me.

INVENTORY CLERK

SUPERVISOR

G.I. RECEIVED



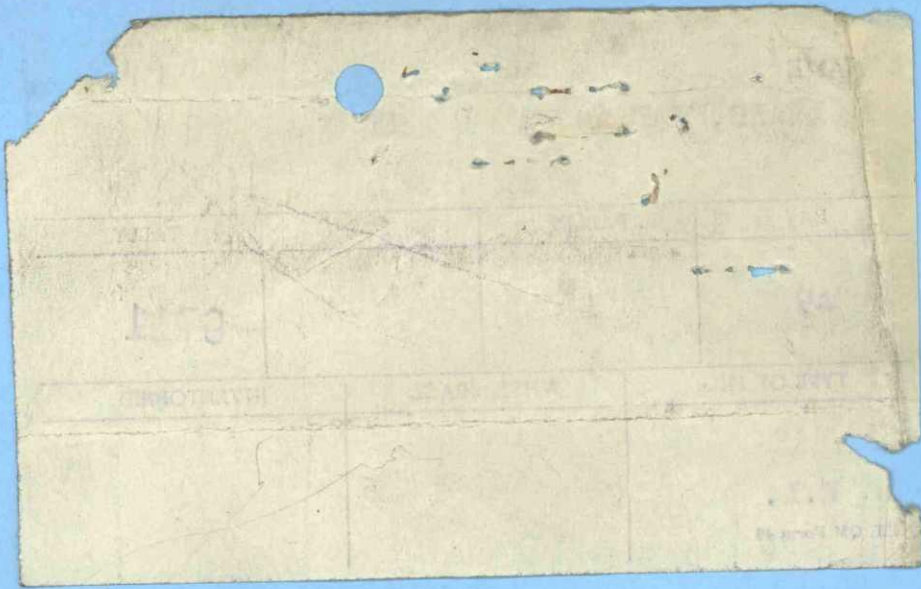
NAME

DRAKE, NATHAN F.

LT

BAY	PALLET	BOX	TALLY
49	1		6711
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
F.L.			

Eff. QM Form 43



STANDARD FORM NO. 1103  
FORM APPROVED BY COMPTROLLER GENERAL U.S. 1943

U. S. GOVERNMENT BILL LADING  
MEMORANDUM

NO. **WW-8223487**

VB

CAR INITIALS AND NO. \_\_\_\_\_

NAME OF INITIAL TRANSPORTATION \_\_\_\_\_

TRAFFIC CONTROL NOS. **252979**

COMPANY **UNIVERSAL CARLOADING & DIST. CO., INC.**

STOP THIS CAR AT	FOR	†SIZE CAR IN FT. & INS.		†MARKED CAPACITY OF CAR		†DATE CAR	DATE B/L ISSUED
		ORDERED	FURNISHED	ORDERED	FURNISHED	FURNISHED	
							<b>21 Mar. 45</b>

RECEIVED BY THE TRANSPORTATION COMPANY NAMED ABOVE, SUBJECT TO CONDITIONS NAMED ON THE REVERSE HEREOF, THE PUBLIC PROPERTY HEREINAFTER DESCRIBED, IN APPARENT GOOD ORDER AND CONDITION (CONTENTS AND VALUE UNKNOWN), TO BE FORWARDED TO DESTINATION BY THE SAID COMPANY AND CONNECTING LINES, THERE TO BE DELIVERED IN LIKE GOOD ORDER AND CONDITION TO SAID CONSIGNEE.

*[Handwritten signature]*

FROM  
(SHIPPING POINT) **KANSAS CITY, MISSOURI**  
FROM (FULL NAME OF SHIPPER)  
**ARMY EFFECTS BUREAU, KANSAS CITY  
QM DEPOT**

MARKS

CONSIGNEE  
**MRS. EDITH K. DRAKE  
1894 PERSHING AVENUE**

DESTINATION  
**SAN BERNARDINO, CALIFORNIA**

VIA (ROUTE JOURNEY ONLY WHEN SOME SUBSTANTIAL INTEREST OF THE GOVERNMENT IS SUBSERVED THEREBY)  
**UNIVERSAL**

**CARRIER'S DELIVERY SERVICE REQUESTED.**

PICK-UP SERVICE AT ORIGIN **WAS NOT** BY THE GOVERNMENT OR ITS AGENT  
(Insert "WAS" or "WAS NOT")

INITIALS OF SHIPPER'S AUTHORIZED AGENT OR EMPLOYEE \_\_\_\_\_

CHARGES TO BE BILLED TO (DEPARTMENT OR ESTABLISHMENT AND BUREAU OR SERVICE AND LOCATION)  
**Finance Officer, U. S. Army, Washington, D. C.**

APPROPRIATION CHARGEABLE  
**509- 910 P 470-03 A 2152409**

ISSUING OFFICE  
**KANSAS CITY QM DEPOT, K.C., MO.**

NAME AND TITLE OF ISSUING OFFICER  
**G. E. JOHNSTON, CAPT. T.C.** Transportation Officer

†FURNISH THIS INFORMATION IN CASE OF CARLOAD SHIPMENTS ONLY.  
\*SHOW ALSO CUBIC MEASUREMENTS FOR SHIPMENTS VIA OCEAN CARRIER IN CASES WHERE REQUIRED.

PACKAGES NO.	KIND	DESCRIPTION OF ARTICLES (USE CARRIERS' CLASSIFICATION OR TARIFF DESCRIPTION IF POSSIBLE, OTHERWISE A CLEAR NONTECHNICAL DESCRIPTION)	NUMBERS ON PACKAGES	ACTUAL
				WEIGHTS*
<b>1</b>	<b>P/L</b>	<b>NON- MILITARY Personal Effects</b>	<b>252979</b>	<b>75</b>
		<b>RELEASED VALUATION AT LOWEST RATE</b>		
		<b>AUTHORITY FOR SHIPMENT:</b>		
		<b>A.W. #112 AND W.D. CIRCULAR #373 14 SEPTEMBER 1944</b>		

CERTIFICATE OF ISSUING OFFICER

CONTRACT NO. OR PURCHASE ORDER NO. \_\_\_\_\_ DATED \_\_\_\_\_  
OR OTHER AUTHORITY FOR SHIPMENT \_\_\_\_\_

F. O. B. POINT NAMED IN CONTRACT \_\_\_\_\_

SIGNATURE OF ISSUING OFFICER **M.F. CISTON, CWO, U.S.A.A.T.O.**

NAME OF TRANSPORTATION COMPANY  
**UNIVERSAL CARLOADING & DIST. CO., INC.**

DATE OF RECEIPT OF SHIPMENT **MAR 22 1945**

SIGNATURE OF AGENT **GENTROPOLIS TRANS.** PER *[Signature]*

**UNIVERSAL CARLOADING & DIST. CO., INC. MEMORANDUM COPY**

6

U. S. GOVERNMENT BILL  
MEMORANDUM

no. WW-823487

CAR INITIALS AND NO.

NAME OF INITIAL TRANSPORTATION

TRAFFIC CONTROL NOS.

COMPANY UNIVERSAL CARRIAGE & WAGON CO., INC.

STOP THIS CAR AT

RECEIVED BY THE TRANSPORTATION COMPANY NAMED ABOVE SUBJECT TO CONDITIONS NAMED ON THE REVERSE HEREOF, THE PUBLIC PROPERTY HEREINAFTER DESCRIBED, IN ACCORDANCE WITH GOOD ORDER AND CONDITION (CONTENTS AND VALUE UNKNOWN), TO BE FORWARDED TO DESTINATION BY THE SAID COMPANY AND CONNECTING LINES, THERE TO BE DELIVERED IN LIKE GOOD ORDER AND CONDITION TO SAID CONSIGNEE.

CONSIGNEE

MR. W. H. BARR  
1806 TASSING AVENUE

DESTINATION

SAN BERNARDINO, CALIFORNIA

VIA ROUTE NUMBER ONLY WHEN SOME SUBSTANTIAL INTEREST OF THE GOVERNMENT IS FURTHER PROMOTED

UNIVERSAL

CARRIER'S DELIVERY SERVICE REQUESTED

INCORPORATED AT ORIGIN BY THE GOVERNMENT OR ITS AGENT

(Insert "WAS" or "WAS NOT" INITIALS OF SHIPPER'S AUTHORIZED AGENT OR EMPLOYEE)

CHARGES TO BE BILLED TO (SEPARATE FOR ESTABLISHMENT AND BUREAU OR SERVICE AND LOCATION)

Product Order 14 2 Army, Washington, D. C.

APPROPRIATION CHARGEABLE

500- 610 2 410-02 A 218400

ISSUING OFFICE

KANSAS CITY OR DEPOT, K.C., MO.

NAME AND TITLE OF ISSUING OFFICER

G. E. JOHNSON, CAPT. T.C.

SHOW ALSO (THIS ARGUMENTS FOR SHIPMENTS VIA OCEAN CARRIER, USE WHERE APPROPRIATE)

FURNISH THIS INFORMATION IN CASE OF CARLOAD SHIPMENTS ONLY

PACKAGES

NO. KIND

DESCRIPTION OF ARTICLES  
USE CARRIER'S CLASSIFICATION OR TAPE DESCRIPTION IF POSSIBLE  
OTHERWISE A CLEAR NONTECHNICAL DESCRIPTION

NON-MILITARY  
Personal Effects

RELEASED VALUATION AT LOWEST RATE

ATTACHMENT FOR SHIPMENT

NUMBERS ON PACKAGES

WEIGHTS

WEIGHTS

RECEIVED  
EFFECTS BUREAU  
JAN 23 1945  
KANSAS CITY, MO.

CERTIFICATE OF ISSUING OFFICER

DATE

CONTRACT NO. OR

PURCHASE ORDER NO.

OR OTHER AUTHORITY FOR SHIPMENT

F. O. B. FORM

PLACED IN CONTRACT

SIGNATURE OF

ISSUING OFFICER

NAME OF TRANSPORTATION COMPANY

UNIVERSAL CARRIAGE & WAGON CO., INC.

DATE OF RECEIPT OF SHIPMENT

SIGNATURE

CENTROPOLIS TRANS

MEMORANDUM

COPY

6

Inventory of Footlock,

Case No 2.

Lt. N.F. Drake

- ack, canvas covered ✓
- sers, pink ✓
- Shoes Civilian ✓
- pers, Rubber soled ✓
- t Field Arctic type. \* ✓
- inter green. \* ✓
- overalls, Brown ✓
- 1 Portfolio, Leather covered ✓
- 1 Card Index ✓
- 1 Bottle Shoe Polish ✓
- 1 Blitz Cloth ✓
- 1 Can Footpowder ✓
- 1 Can Talcum Powder ✓
- 2 Sheets, Cotton White ✓
- Miscellaneous Magazines, books, and stationery supplies. ✓

C E R T I F I C A T E

15 June 1944

I certify that the items of government issue listed on this inventory and indicated by an asterisk are the personal property of the officer concerned and are authorized for this shipment by competent authority.

*Douglas C. Hargrave*  
DOUGLAS C. HARGRAVE  
Capt, 11th Infantry  
Commanding.

Inventory of Footlock  
Case No 2.  
Lt. N.F. Drake

- 1 Miscellaneous magazines, books, and stationery supplies.
- 2 Sheets, Cotton white
- 1 Can Talcum Powder
- 1 Can Footpowder
- 1 Blizz Cloth
- 1 Battle shoe Polish
- 1 Card Index
- 1 Portfolio, leather covered
- 1 Overalls, brown
- 1 Winter Green, \*
- 1 Field Arctic type.
- 1 Rubber soled
- 1 Shoes Civilian
- 1 Sars, ink
- 1 Sack, canvas covered

C E R T I F I C A T E

15 June 1944

I certify that the items of Government issue listed on this inventory and indicated by an asterisk are the personal property of the officer concerned and are authorized for this shipment by competent authority.

*Douglas C. Hargrave*  
 DOUGLAS C. HARGRAVE  
 Capt, 11th Infantry  
 Commanding.

8/13/46

